

ANKENY CHRISTIAN ACADEMY

1604 W 1st Street
Ankeny, IA 50023-2525
515-965-8114
Fax-515-965-8210

www.ankenychristianacademy.org

Teacher Application



Name _____ Phone _____ Cell Phone _____

Address _____
Street City State Zip Code

Email address _____ Date you are available to start _____

I affirm that I am either a U.S. Citizen _____ or an alien legally authorized to work in the U.S. _____ (Check One)

Teaching Certificates:

Years of classroom teaching experience: Full-time _____ Part-time _____

Position Desired: Secondary _____ Elementary _____ Preschool _____

Full-time _____ Part-time _____ Substitute _____

Employment History

Please start with the most recent.

Employer _____ Administrator _____

Address _____ Phone _____

Supervisor business email address (if known) _____

Position _____ From _____ to _____

Reason for leaving _____

Employer _____ Administrator _____

Address _____ Phone _____

Supervisor business email address (if known) _____

Position _____ From _____ to _____

Reason for leaving _____

Employer _____ Administrator _____

Address _____ Phone _____

Supervisor business email address (if known) _____

Position _____ From _____ to _____

Reason for leaving _____

Please list your degrees in Education and Biblical studies.

Please comment on the Lord's leading in your life in regards to teaching in a Christian school.

Describe your personal philosophy of Christian education and teaching style.

What are the main characteristics that distinguish a Christian school from a public school?

What is your philosophy of discipline in a school setting?

What do you feel is the most effective way to communicate with parents? Please give an example.

What do you consider to be the proper classroom atmosphere for learning?

What areas do you feel are your strengths? Weaknesses?

Please list curriculum you have used.

Do you plan to continue your education? What are your career goals?

What activities/responsibilities do you regularly participate in at your church?

Explain your understanding of the inspiration of Scripture.

Please give us a brief statement of your understanding of evolution vs. creationism.

ACA believes in a literal interpretation of the Genesis account of creation (e.g.: six literal 24 hour days). Do you agree with this position? Yes _____ No _____

If no, please explain

Please give an example of a time you shared your faith with someone.

In completing this questionnaire and returning it to Ankeny Christian Academy, I:

- Verify that the information that I have provided in this application is true.
- Give permission to Ankeny Christian Academy to contact any former employers or references listed in this application.
- Understand that giving false information, if hired, can lead to termination of employment.

Signature _____ Date _____

Ankeny Christian Academy will not discriminate on the basis of gender, race, color or ethnic origin in the hiring of its certified teachers or non-certified personnel.

Authorization to Release Information Form

Note: Submitting an incomplete or illegible form may delay the background check results.

I hereby AUTHORIZE and request any law enforcement agency to furnish bearer with criminal history and identity check information in their possession regarding me in connection with my employment in a critical position. I am willing that a photocopy of this authorization be accepted with the same authority as the original. I understand this AUTHORIZATION is to be part of the written employment application which I sign.

I understand that ACA positions that are designated critical require background checks for the purpose of evaluating me for employment. I also understand that any misrepresentation, falsification or omission of facts herein may be grounds for disqualification, release or dismissal.

PRINT NAME: _____

Last

First

Middle

DATE OF BIRTH: _____

**OPTIONAL (REQUIRED
UPON JOB OFFER)** _____

SOCIAL SECURITY #: _____

HOME PHONE #: _____

BUSINESS PHONE #: _____

**OTHER NAMES YOU HAVE USED
(INCLUDING MAIDEN NAME):** _____

Current Address:

Street Number & Name

City

State

Zip

How Long?

Have you been background checked at the Ankeny Christian Academy previously? YES _____ NO _____

If yes, please note date (approximate): _____

SINCE YOUR 18TH BIRTHDAY, HAVE YOU BEEN CONVICTED OF A FELONY OR FELONY-REDUCED-TO MISDEMEANOR CONVICTION BY ANY COURT? YOU MAY OMIT CONVICTION OF A MISDEMEANOR WHILE UNDER AGE 18 IF THE RECORD WAS SEALED UNDER PENAL CODE 1203.45, MINOR TRAFFIC VIOLATIONS FOR WHICH THE FINE IMPOSED WAS \$400.00 OR LESS, OR ANY OFFENSE THAT WAS FINALLY SETTLED IN JUVENILE COURT OR REFERRED TO THE YOUTH AUTHORITY. YES _____ NO _____

If yes, please indicate date, location and explanation:

HAVE YOU EVER BEEN CONVICTED OF A CRIME UNDER ANOTHER NAME? YES _____ NO _____

IF YES, STATE NAME: _____

Complete driver's license information only if this position requires that you drive a motor vehicle.

DRIVER'S LICENSE INFORMATION: _____

License number

Expiration Date

State of Issue

PRIVACY NOTICE

The principal purpose for requesting the information on this form is to conduct background checks on individuals selected for critical positions. ACA policy and federal statute authorize the maintenance of this information.

Furnishing all information requested on this form is mandatory. Failure to provide such information shall result in a determination that the applicant is ineligible for employment or not appropriate for reassignment.

I hereby certify that all statements on this application are true and correct to the best of my knowledge and belief. I understand that the Ankeny Christian Academy solicits this information so as to be informed of my previous record and character. I understand that my employment with Ankeny Christian Academy depends upon successful completion of a criminal background investigation. If employed, I understand that any falsification, misrepresentation or omission of facts of this record may be considered cause for release or dismissal.

APPLICANT SIGNATURE: _____

DATE: _____