



A MINISTRY OF VARDAMAN STREET  
BAPTIST CHURCH

# APPLICATION FOR EMPLOYMENT

908 Frontage Road West  
Wiggins, MS 39577  
Telephone: 601-528-5454

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

In this role each staff member, being mindful of Gateway Christian Academy is expected to support its ministry and philosophy (Col. 3:17). The support and development of the philosophy and ministry of Gateway Christian Academy requires that every staff member be of like faith and order and does necessitate on the part of each individual staff member, a personal, living, maturing relationship with Jesus Christ as Savior and Lord (Col. 3:10). Herein, in this life philosophy, each staff member becomes a part of the philosophy and ministry of Gateway Christian Academy. This ministry is to be actively involved in leading the unsaved to Christ and developing the saved into the likeness of Christ. (II Peter 3:9).

Further development and support of this philosophy and ministry would mean that each staff member be personally committed to faithful church membership in his or her church, supporting the total ministry of the church through attendance of regularly scheduled services, through using one's abilities and spiritual gifts in the various ministries of the church and following a lifestyle Christ came to provide for all men (Proverbs 3:4-6, John 10:10, Galatians 5).

**Note: The following are goals of Gateway Christian Academy that appear on the student applications to which all staff personnel must be committed.**

## OUR GOALS

### **I. The goals for spiritual growth of the students at Gateway Christian Academy are:**

- A. To lead the student to accept the Bible as God's inspired, infallible Word.**
- B. To develop attitudes of love for, respect toward, and dependence upon God's Word.**
- C. To relate the foundational truths of the Bible to everyday life.**
- D. To lead the pupil to a decision of confessing Christ as Savior and Lord.**
- E. To develop a desire to seek, know, and follow the Will of God as revealed in the Scriptures.**
- F. To guide students to evaluate all ideas and to make wise judgments based on God's absolute truth.**

### **II. The goals for physical and social growth of the students at Gateway Christian Academy are:**

- A. To encourage the development of self-discipline, accountability and responsibility in the student based on respect for and submission to authority.**
- B. To help the student to become a contributing member of his/her society and to treat others with love and respect**

- C. To promote good citizenship through developing an understanding and appreciation of our Christian and American heritage.
- D. To teach God's standards for marriage and the family.
- E. To promote physical fitness, good health habits, and wise use of the body as the temple of God.
- F. To impart Biblical attitudes toward material things and to encourage good stewardship and individual responsibility of using them for God's glory.

III. The goals for mental growth of the students of Gateway Christian Academy are:

- A. To provide high academic standards.
- B. To encourage the student to realize his/her full academic potential as an individual uniquely created by God.
- C. To help the student to develop positive attitudes toward learning.
- D. To enable the student to develop appropriate skills for learning and communicating through the enhancement of their abilities.
- E. To help the student assume responsibility for applying the skills he/she has developed.
- F. To encourage the student to continue the use of these acquired academic skills to fulfill God's plan for his/her life as he/she faces the demands of an ever changing world.

As an applicant for a position on the staff of Gateway Christian Academy, being conscious of the above stated reasons for existence and daily purpose of this school, please indicate your response to this stated expectation of each staff member.

I have read, do understand, and will support the stated philosophy and mission of "Gateway Christian Academy."

---

Date

Applicant Signature

\*\*\*\*\*

*(Please complete all requested information that applies)*

Name of Applicant \_\_\_\_\_  
 \_\_\_\_\_  
 First Middle Initial Last Home Telephone

Address \_\_\_\_\_  
 \_\_\_\_\_  
 Street City State Zip Code

Church Membership \_\_\_\_\_  
 \_\_\_\_\_  
 Name of Church

\_\_\_\_\_ Church Mailing Address Phone Pastor

**NOTE: A recommendation from your pastor, included in this packet, will be requested by Gateway Christian Academy**

**PERSONAL:**

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Age \_\_\_\_\_

Sex \_\_\_\_\_ Race \_\_\_\_\_ Social Security Number \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Widowed \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Remarried.

Maiden Name (if married) \_\_\_\_\_

Name of Spouse \_\_\_\_\_ Occupation \_\_\_\_\_

Where Employed \_\_\_\_\_

Name, Age, and Sex of children \_\_\_\_\_

**Position Desired: (Please complete the sections that apply to the position sought)**

**Pre-School / Elementary / Jr. High / High School Teacher** Indicate grades you are most qualified to teach, by marking 1 for first, 2 for second, and 3 for third.

K4 \_\_\_\_\_ K5 \_\_\_\_\_ First Grade \_\_\_\_\_ Second Grade \_\_\_\_\_ Third Grade \_\_\_\_\_ Fourth Grade \_\_\_\_\_ Fifth Grade \_\_\_\_\_

Sixth Grade \_\_\_\_\_ Seventh Grade \_\_\_\_\_ Eighth Grade \_\_\_\_\_ Ninth Grade \_\_\_\_\_ Tenth Grade \_\_\_\_\_

Eleventh Grade \_\_\_\_\_ Twelfth Grade \_\_\_\_\_ Teacher Aide \_\_\_\_\_ Other \_\_\_\_\_

Specialized Areas \_\_\_\_\_

Secondary Teacher (9-12) List subjects in which you are certified and best qualified to teach.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

List co-curricular activities in which you are interested and qualified. (Cheerleader sponsor, etc.)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

**ADMINISTRATION:**

Preferable area(s): Preschool - Grade 6: \_\_\_\_\_ Grades 7 and 8 \_\_\_\_\_ Grades 9-12 \_\_\_\_\_

Present area(s) in which you are certified \_\_\_\_\_

If you are needed in an area in which you are not certified, are you willing to re-enter school, as soon as possible for proper certification? Yes \_\_\_\_\_ No \_\_\_\_\_

**Possible Employment**

Date you can start \_\_\_\_\_ Are you employed at the present time \_\_\_\_\_ If so, may we inquire of your present employer? \_\_\_\_\_

**Educational Background:**

Colleges/Universities

Date Attended

Degree Earned

---

---

---

---

Do you have a current teaching certificate? \_\_\_\_\_ Issuing State: \_\_\_\_\_

Certificate Issue Date: \_\_\_\_\_ Certificate Expiration Date \_\_\_\_\_

Area(s) of Certification: \_\_\_\_\_

Do you expect any change of certification? \_\_\_\_\_ . If so, what sort of change? \_\_\_\_\_

**Employment History: (Including ancillary employment - Custodial/Food Service/Secretarial, etc.)**

Please list all positions chronologically, beginning with most recent)

Dates

Employer/School

Position

---

---

---

---

---

Have you ever been involuntarily terminated from employment? \_\_\_\_\_ If so, state when, why, and from which place of employment: \_\_\_\_\_

---

---

Are you presently serving in the National Guard or Reserves? \_\_\_\_\_

**Health:**

General health conditions: \_\_\_\_\_

Do you have any physical limitations that preclude you from performing any work for which you are now being considered? \_\_\_\_\_ If so, what? \_\_\_\_\_

**References:** List at least three references who have observed your work (if you have at least one year or more of experience) or your educational preparations, (if you have no work experience) giving their name, address and description of their relationship to you. (Including ancillary applicants)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**General:**

National Teacher Exam Scores: \_\_\_\_\_

Have you ever failed to be re-employed \_\_\_\_\_ If yes, where and why? \_\_\_\_\_

All persons making application for a position on the staff of Gateway Christian Academy will be considered equally with all other applicants available, and if offered a position, should understand that there is no contract offering. Termination of employment may occur at any time deemed necessary by the administrator following a two week notice. Self-termination of employment by any member of the staff is acceptable following a two week notice. The Gateway Christian Academy does not practice tenure.

Gateway Christian Academy is a “tobacco free” campus including students, teachers and all other staff. This policy covers all areas of the buildings and property such as restrooms, athletic fields, playgrounds, gym area, parking lots and all others.

Gateway Christian Academy, Inc. does not discriminate on the basis of race, color, national or ethnic origin.

**RETURN COMPLETED APPLICATION**

**TO: GATEWAY CHRISTIAN ACADEMY  
P.O. BOX 1  
WIGGINS, MS 39577**

\_\_\_\_\_  
**SIGNATURE OF APPLICANT**

\_\_\_\_\_  
**DATE**

**NOTE: Included with this application form are three "Applicant's Reference Forms." Please complete top of form and sign each one at the bottom of the page and return them with this "Application for Employment" form.**

**Official Use Only:**  
**Application for Employment Check-List:**

**Date received:** \_\_\_\_\_

**Interview scheduled for:** \_\_\_\_\_

**Interview completed:** \_\_\_\_\_

**Teacher certificate on file:** \_\_\_\_\_

**Type of certification:** \_\_\_\_\_

**Applicant's Reference Form:** \_\_\_\_\_

**Applicant's Reference Form:** \_\_\_\_\_

**Applicant's Reference Form:** \_\_\_\_\_

**Amount of Agreed Salary:** \_\_\_\_\_

**Assigned Position:** \_\_\_\_\_

# Gateway Christian Academy

## Reference Form

The applicant list below is formally applying for a position at Gateway Christian Academy. As part of the employee selection process, it is requested that each applicant forward a copy of the reference form to three persons who are uniquely familiar with his/her ability, potential, and/or past performance. Your prompt attention in completing and returning the form to us will be greatly appreciated. Your reply will be considered strictly confidential.

**It is strongly recommended that you select references that can comment on work experiences as an evaluator, supervisor, ect.**

**APPLICANT** \_\_\_\_\_  
First Middle Last

**POSITION DESIRED** \_\_\_\_\_

**NAME OF REFERENCE** \_\_\_\_\_ **POSITION** \_\_\_\_\_

**SCHOOL/BUSINESS** \_\_\_\_\_ **PHONE** \_\_\_\_\_

TO APPLICANT: All applications and accompanying records become the property of the academy and are not available to candidates. Many people will not complete a reference unless confidentiality can be assured. **I agree for this reference to be confidential, and by signing and dating the waiver of access below, I, the undersigned, waive any rights of access to this reference.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Please record a number from the following scale, which describes the applicant in comparison with persons you have known with comparable years of experience.

**1. Outstanding – Top 10%**

**2. Above Average – Top 25%**

**3. Average – Middle 50%**

**4. Below Average – Bottom 25%**

**(Leave Blank If Unobserved or Unknown)**

Accuracy and Dependability		Instructional Planning	
Assessment of Pupil Needs		Integrity	
Attendance		Judgment and Common Sense	
Classroom Management Skills		Leadership Potential	
Cooperation with Others		Loyalty to Administration	
Correct Use of Standard English		Maturity (Poise, Self-Control)	
Development of Conductive Learning Environment		Motivation and Relationship to Pupils	
Effective Communication		Enthusiasm for Learning and Teaching	
Evaluation of Pupil Progress		Positive Attitude Toward Supervision	
Flexibility		Potential for Professional Growth	
Implementation of Planned Instruction		Professional Attitude	
Initiative and Creativity		Punctuality	

Have you seen the applicant teach? ( ) Yes ( ) No ( ) N/A

Would you employ this person? ( ) Yes ( ) No ( ) N/A

Is this a person you would like to have teach your child? ( ) Yes ( ) No ( ) N/A

For the position desired, I recommend the applicant: ( ) Highly ( ) Favorably ( ) With Reservation ( ) Not at all

How long and in what capacity have you know the applicant? \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Reference

\_\_\_\_\_  
Title

**Please mail completed form to: Gateway Christian Academy, P.O. Box 1, Wiggins, MS 39577**

# Gateway Christian Academy

## Reference Form

The applicant list below is formally applying for a position at Gateway Christian Academy. As part of the employee selection process, it is requested that each applicant forward a copy of the reference form to three persons who are uniquely familiar with his/her ability, potential, and/or past performance. Your prompt attention in completing and returning the form to us will be greatly appreciated. Your reply will be considered strictly confidential.

**It is strongly recommended that you select references that can comment on work experiences as an evaluator, supervisor, ect.**

**APPLICANT** \_\_\_\_\_  
First Middle Last

**POSITION DESIRED** \_\_\_\_\_

**NAME OF REFERENCE** \_\_\_\_\_ **POSITION** \_\_\_\_\_

**SCHOOL/BUSINESS** \_\_\_\_\_ **PHONE** \_\_\_\_\_

TO APPLICANT: All applications and accompanying records become the property of the academy and are not available to candidates. Many people will not complete a reference unless confidentiality can be assured. **I agree for this reference to be confidential, and by signing and dating the waiver of access below, I, the undersigned, waive any rights of access to this reference.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Please record a number from the following scale, which describes the applicant in comparison with persons you have known with comparable years of experience.

- 1. Outstanding – Top 10%
- 2. Above Average – Top 25%
- 3. Average – Middle 50%
- 4. Below Average – Bottom 25%
- (Leave Blank If Unobserved or Unknown)

Accuracy and Dependability		Instructional Planning	
Assessment of Pupil Needs		Integrity	
Attendance		Judgment and Common Sense	
Classroom Management Skills		Leadership Potential	
Cooperation with Others		Loyalty to Administration	
Correct Use of Standard English		Maturity (Poise, Self-Control)	
Development of Conductive Learning Environment		Motivation and Relationship to Pupils	
Effective Communication		Enthusiasm for Learning and Teaching	
Evaluation of Pupil Progress		Positive Attitude Toward Supervision	
Flexibility		Potential for Professional Growth	
Implementation of Planned Instruction		Professional Attitude	
Initiative and Creativity		Punctuality	

Have you seen the applicant teach? ( ) Yes ( ) No ( ) N/A  
Would you employ this person? ( ) Yes ( ) No ( ) N/A  
Is this a person you would like to have teach your child? ( ) Yes ( ) No ( ) N/A  
For the position desired, I recommend the applicant: ( ) Highly ( ) Favorably ( ) With Reservation ( ) Not at all  
How long and in what capacity have you know the applicant? \_\_\_\_\_  
Additional Comments: \_\_\_\_\_

\_\_\_\_\_  
Date Signature of Reference Title

Please mail completed form to: Gateway Christian Academy, P.O. Box 1, Wiggins, MS 39577





# Gateway Christian Academy

## Comprehensive Background Investigation for Employment Purposes

NAME: \_\_\_\_\_  
Last Name
First Name
Middle Name

OTHER NAMES: \_\_\_\_\_ NAME ON LICENSE: \_\_\_\_\_  
 (aliases, nicknames, maiden, etc.)

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_ EXPIRES: \_\_\_\_/\_\_\_\_/\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME (ANY crime, misdemeanor and/or felony)? YES NO

If YES, please explain: \_\_\_\_\_

PREVIOUS HOME ADDRESSES FOR THE LAST 7 YEARS, BEGINNING WITH CURRENT ADDRESS

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_-\_\_\_\_\_  
 Street Address City State & Zip County From To

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_-\_\_\_\_\_  
 Street Address City State & Zip County From To

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_-\_\_\_\_\_  
 Street Address City State & Zip County From To

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_-\_\_\_\_\_  
 Street Address City State & Zip County From To

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_-\_\_\_\_\_  
 Street Address City State & Zip County From To

In connection with my application for employment, I understand that an investigative consumer report will be requested, that will include information (at a minimum) as to my criminal record, sex offender status, SSN authenticity, driver's license authenticity, address history, and work references (e.g., character, work habits, performance, and experience, along with dates, title, duties, and reasons for termination of past employment). I understand that as directed by policy and consistent with the job described, additional information from public and private sources about my motor vehicle driving records, civil court records, education, credentials, and credit may be reviewed. According to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of credit information obtained by my prospective employer from a consumer-reporting agency. If so, I will be notified and given the name and address of the agency or source that provided the information. I acknowledge that a facsimile (FAX) or photographic copy of this form shall be as valid as the original. I hereby authorize, without reservation, any law enforcement agency, institution, information service bureau, school, employer, or reference contacted by Gateway Christian Academy, or its agent, to furnish the information described above. I hereby release Gateway Christian Academy and their agents and all persons, agencies, and entities providing information or reports about me from any and all liabilities arising out of the request for or release of the above mentioned information or reports. The Age Discrimination in Employment Act of 1987 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age. Date of birth information is for consumer reports purposes only. I pledge that the data supplied above is true and accurate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## Statement of Faith

1. We believe the Bible to be the only inspired, inerrant, and authoritative Word of God.
2. We believe there is one God, infinitely perfect and eternally existent in three persons: Father, Son, and Holy Spirit.
3. We believe in the complete deity and perfect humanity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His substitutionary atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, in His ministry of intercession for His people, and in His personal return in power and glory.
4. We believe man was originally created in the image of and after the likeness of God and that man fell through sin and is therefore spiritually dead in trespasses and sin.
5. We believe in salvation by the sacrifice of Christ received by grace through faith alone.
6. We believe in the present ministry of the Holy Spirit in this world, which includes the convicting of the lost of sin, the regenerating and indwelling of all who believe, and the empowering of believers for service and godly living.
7. We believe in the bodily resurrection of the dead -- the saved to the resurrection of eternal life and the lost to the resurrection of eternal punishment.
8. We believe in the spiritual unity of all believers under the headship of Jesus Christ.

Have you read and agree with the Statement of Beliefs of Gateway Christian Academy? \_\_\_\_\_

(If there are areas of disagreement with our beliefs, state which areas and explain your position, using a separate sheet.)

Are there any areas of beliefs on which you have not formed an opinion? \_\_\_\_\_ If so, which ones? \_\_\_\_\_

---

---

---

---

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

# Gateway Christian Academy

P.O. Box 1

Wiggins, MS 39577

Phone: (228) 860 4936 or (601) 928-3943

## Pastoral or Ministry Leader Recommendation

### APPLICANT INFORMATION

Last Name	First	Middle
Pastor or Ministry Leader's Name		
Name of Church		Phone
Street Address	City	Zip

### PASTORAL QUESTIONS

**The above named person is applying for employment at Gateway Christian Academy. Please answer the following questions about this applicant to the best of your knowledge by circling the response that applies. Please mail it to the school at the address listed above. Thank you for your time and assistance**

How long have you known this applicant?	Less than 1 year	1 to 2 years	More than 2 years
How well do you know this applicant?	Very well	Well	Somewhat
How would you describe this applicant's relationship with God?	Serious and Committed	Struggles, but loves the Lord	Saved, not walking with Jesus
	Unknown to me	Doesn't know the Lord	
How would you describe this applicant's reliability?	Always Reliable	Average	Unreliable
How would you describe the applicant's work habits?	Hard worker/Diligent	Average	Quits easily/Lazy
How would you describe the applicant's attitude?	Respectful/Enthusiastic	Average	Poor
How would you describe the applicant's ability to work with others?	Very cooperative	Average	Uncooperative
How would you describe the applicant's emotional character?	Well balanced/Mature	Average	Emotional/Immature
How would you describe the applicant's submission to authority?	Submissive	Average	Poor

### Comments:

Leader's Signature	Date

Please return completed form to: Gateway Christian Academy, P.O. Box 1, Wiggins, MS 39577