

**PERSONAL:**

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Email Add: \_\_\_\_\_

Phone No. \_\_\_\_\_

Age: \_\_\_\_\_

D.O.B: \_\_\_\_\_

Birthplace: \_\_\_\_\_

Current Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Marital Status:  Married  Divorced  
 Separated  Widowed

*(If currently or previously Separated or Divorced, please include a letter of explanation.)*

No. of Children: \_\_\_\_\_

Their Age(s): \_\_\_\_\_

**HEALTH:**

Condition of Health:  Excellent  Fair  
 Good  Poor

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Physical disabilities, if any:

\_\_\_\_\_

\_\_\_\_\_

Are you currently or have you ever been on prescription medication? *If so, please specify:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you currently or have you ever undergone therapy or treatment from either a psychologist or a psychiatrist?

*If so, please specify:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PROFESSIONAL:**

College & University Training:

Undergraduate: \_\_\_\_\_

Date: \_\_\_\_\_

Graduate: \_\_\_\_\_

Date: \_\_\_\_\_

Degree: \_\_\_\_\_

Date: \_\_\_\_\_

Major Subject(s): \_\_\_\_\_

\_\_\_\_\_

Minor Subject(s): \_\_\_\_\_

\_\_\_\_\_

Other college distinctions or honours:

\_\_\_\_\_

What valid teaching and / or other relevant administrative credentials do you hold?

\_\_\_\_\_

\_\_\_\_\_

Are you prepared to teach Biblically based subjects and other Christian doctrine?

\_\_\_\_\_

Are you able to teach:

Art  Cooking  Hand Crafts  
 Music  Sports  Other

*Please specify:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What special school activities can you conduct? *(Teachers only)*

\_\_\_\_\_

\_\_\_\_\_

Are you a member of any educational or professional organizations? *If so, please specify:*

\_\_\_\_\_

\_\_\_\_\_

What is the nature of your leisure reading?  
*(Mention typical books and periodicals)*

\_\_\_\_\_

\_\_\_\_\_

Other Experience: *(Business, Administrative, etc)*

\_\_\_\_\_

\_\_\_\_\_

**PREVIOUS EMPLOYMENT:**

*(Please attach CV)*

Teaching Experience: *(Teachers Only)*

School (1): \_\_\_\_\_

Grades: \_\_\_\_\_

Subjects: \_\_\_\_\_

Dates: \_\_\_\_\_

School (2): \_\_\_\_\_

Grades: \_\_\_\_\_

Subjects: \_\_\_\_\_

Dates: \_\_\_\_\_

School (3): \_\_\_\_\_

Grades: \_\_\_\_\_

Subjects: \_\_\_\_\_

Dates: \_\_\_\_\_

Reason for leaving last position:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Person to whom we may contact for your references:

Full Name: \_\_\_\_\_

Company: \_\_\_\_\_

Position: \_\_\_\_\_

Email Add: \_\_\_\_\_

Phone No. \_\_\_\_\_

**SPIRITUAL:**

Do you have a personal conviction and assurance that you are a born-again Christian?

Yes  No  Unsure

Give a statement of your Christian faith and convictions. Please give your view on the subject of living a separated life.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Where is your church membership?

\_\_\_\_\_

\_\_\_\_\_

Are you actively engaged in Christian Work?

Full Time  Part Time  Not at all  
 Only during Sunday and other set services

What position / role do you fulfil within this work?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If married, what is the attitude of your spouse in regard to your teaching in a Christian school? *(Teachers only)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What spiritual guidance and counselling would you hope to give the children?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In what way do you feel the private Christian school fits into the educational program of our country? *(Teachers only)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DISCIPLINE:**

Are you a good disciplinarian?

- All of the time     Most of the time     Sometimes  
 Not usually     Not at all

What would you do with a child who is upset and having a temper-tantrum in reaction to a home / class situation?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What would you do with a pupil / child who is daydreaming all of the time?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Select the educational therapies listed below that you would use to influence pupil / child behaviour.

*(Please mark the appropriate box ranging from Never to All of the Time.)*

**PUNISHMENT:**

Never      All of the time

**PRAISE:**

Never      All of the time

**AWARD / REWARD:**

Never      All of the time

**APPEAL TO IDEALS:**

Never      All of the time

**REASONING:**

Never      All of the time

**APPEAL THROUGH EMOTIONAL TIES WITH THE TEACHER:**

Never      All of the time

**APPEAL TO MOTIVATION TO GROW UP AND BE ADULTS:**

Never      All of the time

**USE OF GROUP CODES AND MORALS:**

Never      All of the time

**CHANGING THE CLASS ENVIRONMENT:**

Never      All of the time

**INTERVIEWS-GROUP DISCUSSIONS:**

Never      All of the time

**USE OF MOTION PICTURES:**

Never      All of the time

**USE OF SHAMING THE CHILD TO TEARS:**

Never      All of the time

**CRITICISM:**

Never      All of the time

**OTHER:**

Have you sought the Lord's guidance through prayer regarding this application?

\_\_\_\_\_  
\_\_\_\_\_

If your application is considered favourably, on what date can you start work?

\_\_\_\_\_  
\_\_\_\_\_

**ACCEPTANCE AND DECLARATION:**

I, \_\_\_\_\_

agree that to the best of my knowledge the above listed information is correct and true.

Signed at: \_\_\_\_\_

On this day: \_\_\_\_\_

Signature: \_\_\_\_\_