



# TEXOMA CHRISTIAN SCHOOL

## Employment Application for Non-Instructional Position

This application will be given every consideration, provided that each item is answered in a complete and accurate manner. The receipt of this application does not imply that the applicant will be employed.

### PERSONAL:

Name :			Home Phone (    )		
Last	First	Middle	AC		
Present Address					
Number		Street	City	State	Zip
Previous Address					
Number		Street	City	State	Zip
Social Security Number			Are you over 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Driver's License Number:			State:	Type:	
Email Address:			Cell Phone: (    )		

Are you a citizen of the U.S. or do you have the legal right to be employed in the United States?  
 Yes  No

Please write about your relationship with God. Include your conversion, spiritual growth, and your present spiritual walk:

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Of what church are you a member?

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Pastor/Minister's Name:

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Do you use tobacco products, illegal drugs, and /or drink alcoholic beverages?  Yes  No

### EMPLOYMENT DESIRED:

Are you seeking  full-time  part-time  temporary or summer employment?

Position applied for : \_\_\_\_\_ Wage Per Hour Desired: \_\_\_\_\_

Have you ever applied here before?  Yes  No    Have you ever worked here before?  Yes  No

If you answered Yes to either of the above questions, state when and where you applied and/or worked.

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How did you learn of our school and/or position?

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Are you now, or do you expect to be, working in any other business or job?  Yes  No

Are there any days or hours you would be willing or unwilling to work?  Yes  No

If yes, please specify

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When would you be available to start?

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Are you presently employed?  Yes  No If yes, may we contact your employer?  Yes  No

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Would you be willing and able to perform all the tasks required by the job for which you are applying?  Yes  No If not, explain which tasks

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Will you abide by the safety rules and all policies and procedures of this school?  Yes  No

Would you be willing and able to report to work on time every day on a regular and consistent basis?  Yes  No If not, please explain

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Have you ever been fired or asked to resign from a job?  Yes  No If yes, please explain

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Have you ever been disciplined or received verbal or written warnings for absenteeism and/or tardiness?  Yes  No If yes, please explain

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**EDUCATION**

Name, Address and Location	Dates	Graduated?	Courses Studied
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No	Diploma:
College	From: To:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Diploma:
Trade or Business School	From: To:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Diploma:

Are you planning to pursue further studies?  Yes  No If so, when, where, and what courses?

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**WORK HISTORY:**

List names of employers in consecutive order with present or last employer list first. Account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references. Please state month and year.

Name of Employer Address City, State, Zip	Name and Title of Last Supervisor	Dates Employed		Pay
Telephone Area Code ( )		From:	To:	Starting
Nature of Business		Mo. ___ Yr. ___		\$ _____
Title				Ending
		Mo. ___ Yr. ___		\$ _____
Duties	Reasons	for leaving		

  

Name of Employer Address City, State, Zip	Name and Title of Last Supervisor	Dates Employed		Pay
Telephone Area Code ( )		From:	To:	Starting
Nature of Business		Mo. ___ Yr. ___		\$ _____
Title				Ending
		Mo. ___ yr. ___		\$ _____
Duties	Reasons	for leaving		

  

Name of Employer Address City, State, Zip	Name and Title of Last Supervisor	Dates Employed		Pay
Telephone Area Code ( )		From:	To:	Starting
Nature of Business		Mo. ___ Yr. ___		\$ _____
Title				Ending
		Mo. ___ yr. ___		\$ _____
Duties	Reasons	for leaving		

If you worked in any of your previous positions under another name, please give that name for reference checking purposes:

\_\_\_\_\_  
 Name @ Company Name

If you have additional information / comments concerning your interest in working for TCS which would help in determining your suitability for employment with us, please use the space below or continue on a separate sheet

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

**REFERENCES:**

Give three references who are not relatives or former employers.

Name	Address	Phone	Occupation

In Case of Emergency Notify:

Name

Address

Phone Number

**AUTHORIZATION TO RELEASE REFERENCE INFORMATION**

I have made application for a position with Texoma Christian Schools. I authorize Texoma Christian Schools to inquire about my work and personal history and to verify all data given in my application for employment, related papers, and my oral interviews.

I authorize the release and giving of any information requested by Texoma Christian Schools such as employment records, performance reviews, and personal references whether such information is favorable or unfavorable to me.

I release any person, organization, or company from any all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me.

I further waive the right to ever personally view any references given to Texoma Christian Schools.

I further certify that I have carefully read and do understand the above statements.

\_\_\_\_\_  
Applicant's Name (Print)

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

\_\_\_\_\_  
Date



**Background Verification Release Form**

**AGENCY INFORMATION**

Date	Agency Name
Contact Name	
Agency's Main Phone Number	Agency's Fax Number

**APPLICANT INFORMATION:**

Applicant Full Name (Last, First, MI)		Maiden or Other Name(s) Used	
Current Address			
City	State	Zip Code	County
Social Security Number	Date of Birth	Driver's License Number	State Issued
Position Applied For			
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Race <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Anglo <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other	

I hereby authorize VERIFYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge VERIFYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to VeriFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Parent/Guardian's Signature  
(if under 18 years of age)

