



United Faith Christian Academy

8617 Providence Road

Charlotte, NC 28277

Phone: (704) 541-1742 Fax: (704) 540-7926 www.ufca.org

APPLICATION FOR EMPLOYMENT – NON TEACHING FACULTY

Office Use Only

Interview Date: _____

Reference Check: _____

2nd Interview: Yes No

Background Check: _____

Probable Placement: _____

Contract Offered Accepted

Date of Application: _____

Date Available For An Interview: _____

Applying For: Full Time Part Time

Referred By: _____

Date Available To Begin Work? _____

Personal Data

Name: Mr. Mrs. Miss _____
(Last) (First) (Middle)

If married, please include maiden name in parenthesis

SS Number: _____ Home Phone: _____ Cell Phone: _____

Current Address: _____

City: _____ State: _____ Zip Code _____

Date of Birth: _____ Email: _____

If married, please provide name of spouse _____

Name, sex, age, and grade of children still living at home

1.	4.
2.	5.
3.	6.

Please provide the name, address, and telephone number of contact in case of an emergency:

Name: _____
(Last) (First) (Middle)

Relationship to You: _____ Home Phone: _____ Business Phone: _____

Address: _____

City: _____ State: _____ Zip Code _____

Position For Which You Are Applying

Please indicate the position(s) for which you are applying.

- Classroom Aide
 Substitute
 Admin/Office Staff
 Coach
 Assistant Coach
 Before/After School Staff
 Other _____

Education

College or University	City/State	Degree	Major	Dates Attended	Overall GPA

Copies of all College and/or University transcripts, both undergraduate and graduate, must be filed with your application or soon after it has been submitted.

Experience

Beginning with your most recent position, list all experience for which you have been or are being paid. Please complete all information even if you include a resume.

1) Name of Company: _____ From: _____ To: _____

Address: _____ Phone: _____

Job Title: _____ Full Time Part Time

Reason for Leaving: _____

Name and Title of Supervisor: _____ May we contact? Yes No

2) Name of Company: _____ From: _____ To: _____

Address: _____ Phone: _____

Job Title: _____ Full Time Part Time

Reason for Leaving: _____

Name and Title of Supervisor: _____ May we contact? Yes No

3) Name of Company: _____ From: _____ To: _____

Address: _____ Phone: _____

Job Title: _____ Full Time Part Time

Reason for Leaving: _____

Name and Title of Supervisor: _____ May we contact? Yes No

4) Name of Company: _____ From: _____ To: _____

Address: _____ Phone: _____

Job Title: _____ Full Time Part Time

Reason for Leaving: _____

Name and Title of Supervisor: _____ May we contact? Yes No

Have you ever been dismissed from a position? Yes No If yes, please explain:

References

List persons, such as former employers, pastors, supervisors, and instructors, who have firsthand knowledge of your professional preparation and competence, and your spiritual maturity. A minimum of three references is requested.

Incomplete/inaccurate reference information (i.e., names, addresses, zip codes, phone numbers, etc.) may make it difficult for your application to be given further consideration.

1) Name: _____ Title: _____ School/Company: _____

Address: _____
(Address) (City) (State) (Zip Code)

Work Phone: _____ Home Phone: _____

2) Name: _____ Title: _____ School/Company: _____

Address: _____
(Address) (City) (State) (Zip Code)

Work Phone: _____ Home Phone: _____

3) Name: _____ Title: _____ School/Company: _____

Address: _____
(Address) (City) (State) (Zip Code)

Work Phone: _____ Home Phone: _____

Personal History/Information

Do you have any physical condition or handicap that may limit your ability to perform the job for which you are applying? If so, please describe:

Have you ever been convicted of a felony, or a misdemeanor which resulted in imprisonment? If so, what was the felony or misdemeanor?

Have you ever been convicted of child abuse of any kind? If so, please describe:

Why do you wish to work at United Faith Christian Academy? _____

Of what church are you a member? _____ Denomination: _____

Church Address: _____
(Address) (City) (State) (Zip Code)

Pastor's name: _____ Church phone: _____

Please briefly give your personal Christian testimony: _____

I verify that all of the above information is true and correct. I understand that any intentional falsification of any portion of this application will be grounds for immediate dismissal. Employment is contingent on successful completion of background investigation and references check.

(Applicant's Signature)

(Date)

REV. 10/08