

## Application

### Checklist:

- I have completed, signed and dated this application.
- I have completed, signed and dated the background check form.
- I have attached copies of degrees and certifications, as applicable.
- I have attached copies of my transcripts as applicable.
- I have provided contact information for 4 references (two professional, one personal, and one spiritual).

Submit your final application by email to [sara.neuder@gmail.com](mailto:sara.neuder@gmail.com) or mail your paper application to Trinity on the Border P.O Box 231 La Feria, TX 78559. You may also drop off your application in person, please contact us about the best time to do this.

(Contact Info)

## Personal Information

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Do you speak Spanish?                      Yes      No

Are you comfortable leading a class in singing?  
    Yes      No

Can you perform all the essential job function(s) of the position(s) for which you are applying with reasonable accommodations?    Yes      No

If no, please explain \_\_\_\_\_

\_\_\_\_\_

## Employment Preference

**Circle all (if more than one, please rank with 1 being first priority):**

Elementary Teacher

Classroom Assistant

*Section 702 of the Civil Rights Act of 1964 exempts religious organizations from Title VII's prohibition against discrimination in employment on the basis of religion. Applicants who meet the religious requirements shall be provided an equal opportunity to be considered for hire regardless of race, color, national origin, sex, age or the presence of a non-job-related medical condition or handicap.*

## Education, Certifications, and Employment History

1) COMPLETE THE FOLLOWING INFORMATION REGARDING YOUR EDUCATION

SCHOOL NAME/LOCATION	MAJOR/MINOR	DEGREE	DATES ATTENDED	YEAR GRADUATED	GPA

2) PLEASE LIST ANY RELEVANT CERTIFICATIONS BELOW:

CERTIFICATION	STATE	DATE RECEIVED	EXPIRATION DATE	SUBJECT

3) BEGINNING WITH YOUR CURRENT EMPLOYER, LIST YOUR LAST THREE JOBS:

BEGINNING / ENDING DATES	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING

## ESSAY PORTION

(Attach numbered answers in a separate document.)

### Education

- 1) Please state your philosophy of education.
- 2) Describe your personal understanding of Christian education and how you would lead children in the Christian faith in the classroom.
- 3) What are the qualities of an excellent teacher (or teacher's assistant)?
- 4) Our school requires a high level of order and structure. How do order and structure look for you in your own life?
- 5) What are your thoughts about creating and maintaining order in the classroom.
- 6) How do you function working alongside of others? How do you handle criticism and feedback?
- 7) Are you comfortable having someone observe you in the classroom and working as a team to implement changes?
- 8) Are you comfortable making significant changes to your current teaching style to implement this new approach?

### Spiritual Maturity

- 1) Briefly, describe your history of becoming a Christian. Were you raised in a Christian home, was it something you entered into later in life? Have you been baptized? When/Where?
- 2) Which church do you attend? How long have you attended? What is your involvement there?
- 3) What Christian practices are important to you? What role does prayer play in your life?
- 6) In your opinion, what Christian teachings are crucial or non-negotiable?
- 7) Please share your beliefs on the following subjects: salvation, the Trinity, the Deity of Christ, the inerrancy of scripture, creation and evolution.
- 8) Do you believe that you are capable and ready to communicate the Christian faith to others?

### Miscellaneous

- 1) What are your hobbies?
- 2) What books have you read in the past year? Do you have an all time favorite book?
- 3) Tell us something interesting about yourself.

## Background Check Information Form

Name (Last, First, Middle) \_\_\_\_\_ Maiden Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Drivers License # \_\_\_\_\_

\*Please attach a copy of your driver's license.

Please answer the following with Yes or No:

Are you eligible to work in the United States?      Yes      No

Have you ever been convicted of a criminal offense, other than a minor traffic violation? Yes  
No

Does your name appear on any Sex Offender Database in any state or country? Yes      No

Have you ever been accused or charged with a crime or incident involving a child, the elderly or the disabled? Yes      No

Have you ever struggled with any sin involving a child, the elderly or the disabled? Yes      No

Have you ever been charged with a crime or misconduct at your workplace?      Yes      No

Have you ever been accused of improper conduct by an employer or as a volunteer for any reason?      Yes      No

Is there any other information regarding your past that is relevant to your involvement with The Trinity School, including but not limited to a child, the elderly, the disabled, or ministry in general we should know?      Yes      No

If you answered "Yes" to any of the questions above, please provide a written explanation on a separate sheet of paper and attach it to this form. Please be prepared to discuss your answers. By signing below I agree to immediately inform The Trinity School of any subsequent information, including any accusations, convictions or other occurrences that relate to the areas of inquiry set forth above.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_

## References

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Relationship \_\_\_\_\_ Known for \_\_\_\_\_ years

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Relationship \_\_\_\_\_ Known for \_\_\_\_\_ years

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Relationship \_\_\_\_\_ Known for \_\_\_\_\_ years

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Relationship \_\_\_\_\_ Known for \_\_\_\_\_ years

## Affidavit

I HEREBY RELEASE AND HOLD HARMLESS FROM LIABILITY all persons, organizations, and other entities which provide references or information to THE TRINITY SCHOOL with regard to me or my background. I HEREBY RELEASE AND HOLD HARMLESS FROM LIABILITY The Trinity School., and its clergy, staff, employees, and volunteers, with regard to any decision that it makes on my application.

I consent to a copy of this consent being furnished to any reference that I have provided to The Trinity School and to any other person, organization or entity that The Trinity School deems necessary in connection with its investigation of my character and qualifications.

I realize that this information may be of a confidential nature and will be discussed with only those on a need to know basis: at a Pastoral level, Human Resources, or anyone who might be involved in the background check.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

PRINTED NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_