



## APPLICATION FOR EMPLOYMENT

**Harrison-Chilhowee Baptist Academy**

*The King's Academy, Grades K4 - 12 Boarding and Day School*

**202 Smothers Road, Seymour, TN 37865-5056**

**Telephone (865) 573-8321 ~ Fax (865) 573-8323 ~ Email [administration@thekingsacademy.net](mailto:administration@thekingsacademy.net)**

**Toll Free 877-EST-1880 (877-378-1880)**

**Website [www.thekingsacademy.net](http://www.thekingsacademy.net)**

Position(s) Desired \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Application Date Month \_\_\_\_\_ Date \_\_\_\_\_ Year \_\_\_\_\_ Date Available Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

### I. PERSONAL INFORMATION

Full Name \_\_\_\_\_ Sex M \_\_\_\_\_ F \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_

Telephone: Cell \_\_\_\_\_ Residence \_\_\_\_\_ Business \_\_\_\_\_

Email(s) \_\_\_\_\_

Marital Status Single \_\_\_\_\_ Engaged \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Occupation: \_\_\_\_\_

Years Married \_\_\_\_\_ Number of Children \_\_\_\_\_ Ages \_\_\_\_\_

Social Security Number \_\_\_\_\_ Driver License State \_\_\_\_\_ Class \_\_\_\_\_ Expiration \_\_\_\_\_

### II. EDUCATION BACKGROUND

High School Attended (Include City and State) \_\_\_\_\_ Did you graduate? \_\_\_\_\_ Year \_\_\_\_\_

| College/Universities Attended<br>(Include Locations) | Dates Attended |    | Field of Study<br>Major / Minor | Degree/Certificate Earned<br>(Include Date Issued) | Total Semester<br>Hours Earned |
|--|----------------|----|---------------------------------|--|--------------------------------|
|  | From           | To |                                 |  |                                |
|  |                |    |                                 |  |                                |
|  |                |    |                                 |  |                                |
|  |                |    |                                 |  |                                |

**III. TEACHER / ADMINISTRATOR CERTIFICATION**

Subject/Grade Level Certifications (Include Code Numbers, if available) \_\_\_\_\_

Certificate Number(s) \_\_\_\_\_ State or Issuing Agency \_\_\_\_\_

Type of Certificate \_\_\_\_\_ Date Issued \_\_\_\_\_ Expiration Date \_\_\_\_\_

List other subjects in which you have at least 12 semester hours.

\_\_\_\_\_

**IV. PROFESSIONAL EXPERIENCE**

Start with your present or most recent position. Use additional sheet if necessary.

| Dates<br>_____<br>Salary | Name of School | City/State | Title/Duties | Subjects & Grade Levels | Full Time or<br>Part Time |
|--------------------------|----------------|------------|--------------|-------------------------|---------------------------|
| _____                    |                |            |              |                         |                           |
| _____                    |                |            |              |                         |                           |
| _____                    |                |            |              |                         |                           |
| _____                    |                |            |              |                         |                           |

List extracurricular activities (sports, fine arts, clubs, etc.) in which you have participated and can confidently direct.

\_\_\_\_\_

If applying for a position in Grades K - 8, list any specialized training in Reading, Music, Art, Drama, or Writing.

\_\_\_\_\_

\_\_\_\_\_

**V. OTHER WORK EXPERIENCE**

Start with your present or most recent position. Use additional sheet if necessary.

| Dates<br>_____<br>Salary | Employer | Address | Title/Description of Work | Full Time or<br>Part Time |
|--------------------------|----------|---------|---------------------------|---------------------------|
| _____                    |          |         |                           |                           |
| _____                    |          |         |                           |                           |
| _____                    |          |         |                           |                           |
| _____                    |          |         |                           |                           |

**VI. CHRISTIAN COMMITMENT**

Do you profess to be a Christian? Yes \_\_\_\_\_ No \_\_\_\_\_ If "Yes," please explain what this means to you.

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The following statement is affirmed by all employees and represents a shared commitment of faith.

**STATEMENT OF FAITH**

I believe the Bible to be the inspired, the only infallible, authoritative Word of God. I believe that there is one God, eternally existent in three persons: Father, Son, and Holy Spirit. I believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return in power and glory. I believe that for salvation of lost and sinful man regeneration by the Holy Spirit is absolutely essential. I believe in the resurrection of both the saved and the lost; they that are saved unto the resurrection of life and they that are lost unto the resurrection of damnation. I believe in the spiritual unity of believers in our Lord Jesus Christ.

Do you fully subscribe to this Statement of Faith? Yes \_\_\_\_\_ No \_\_\_\_\_ If your response is "No," please explain any reservations:

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Recognizing that employees are expected to be concerned with the total life of our students, would you comment on your willingness to lead and assist students by example, prayer, and counseling in coming to a meaningful relationship to Jesus Christ?

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Are you an active member of a church? Yes \_\_\_\_\_ No \_\_\_\_\_ If "Yes," please provide the following information:

Church Name \_\_\_\_\_ Pastor \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

What church are you currently attending?

Church Name \_\_\_\_\_ Pastor \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

In what church activities are you involved and with what degree of regularity?

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**VII. REFERENCES**

Please list four people who are able and willing to comment on your work and character.

| Name<br><hr/> Relationship to Applicant | Title / Position<br>Organization / Address | Telephone & Email<br>Contact Information |
|---|--|--|
| <hr/>                                   |  |  |
| <hr/>                                   |  |  |
| <hr/>                                   |  |  |
| <hr/>                                   |  |  |

**VIII. CERTIFICATION AND AGREEMENT**

I understand that Harrison-Chilhowee Baptist Academy and its related ministries do not discriminate in employment practices against any person because of age, race, color, national or ethnic origin, sex or disability. I further understand that any offer of employment is conditioned on the proof of legal authority to work in the United States.

I hereby certify that the facts set forth in this initial application are true and complete to the best of my knowledge. I understand that discovery of falsification of any statement or significant omission of fact during any phase of the hiring process may prevent me from being hired, or, if hired, may subject me to immediate dismissal.

I authorize the academy 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 the academy such as employment records, performance reviews, and personal references. I release any person, organization, or company from liability or damage, which may result from furnishing the information requested. I further waive the right to ever personally view any references given to the academy. I agree to submit personal information for the purpose of a criminal background investigation.

As an applicant for a position at Harrison-Chilhowee and its ministries, I recognize, understand, and adhere to the moral and ethical standards and mandates of said school. I further declare that with regard to my personal moral and ethical character and conduct as of this date, I am not, nor have been in the past engaged in inappropriate conduct toward minors, nor do I have inclinations toward such conduct. Inappropriate conduct includes the following: verbal, physical or sexual abuse as defined by Scripture and state laws.

I declare that the above statements are factual and true. By affixing my signature, I declare that I meet the moral and ethical standards of Harrison-Chilhowee. I further certify that I have carefully read and do understand the above statements.

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

\_\_\_\_\_  
Date

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## Application for Employment - General Supplement

Applicant Full Name \_\_\_\_\_ Date \_\_\_\_\_

1. Have you ever been dismissed, resigned to avoid being dismissed, or been asked to resign from a position?

Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes," please explain. \_\_\_\_\_  
\_\_\_\_\_

2. Have you ever been convicted of any offense or crime? Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes," indicate the nature of the offense, date, court and disposition.

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

3. As an employee you may be asked specific questions about controversial issues by our students. Your answers will come from your personal convictions. We need to know the views of those who would be role models for our students.

Please share your personal conviction toward:

• Wine, beer, and other alcoholic beverages \_\_\_\_\_

\_\_\_\_\_

• Tobacco \_\_\_\_\_

\_\_\_\_\_

• Marijuana and other drugs \_\_\_\_\_

\_\_\_\_\_

• Premarital sex \_\_\_\_\_

\_\_\_\_\_

• Abortion \_\_\_\_\_

\_\_\_\_\_

• Homosexuality \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_  
Date

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## AUTHORIZATION TO RELEASE REFERENCE INFORMATION

I have made application for a position with Harrison-Chilhowee Baptist Academy (doing business as The King's Academy). I authorize the academy 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 the academy 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 and 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.

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Applicant's Name (Print)

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Applicant's Signature

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Applicant's Social Security Number

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Date