

APPLICATION FOR CONTRACT

Administrative Staff

FOR OFFICE USE Date of Hire:	
Position:	

ADMINISTRATOR APPLICATION								
SECTION	SECTION 1: BIOGRAPHICAL INFORMATION							
APPLICATION DATE:		APPLYING FOR: ☐ PRE K-						
NAME:								
(LAST)	(FIRST)	(MIDDLE)						
SOCIAL SECURITY #:								
Address:								
(STREET/PO	Box)	(CITY AND STATE)	(ZIP)					
E-MAIL ADDRESS:								
Home Phone:	CELL: PHONE	Work Ph	ONE:					
WHEN COULD YOU BEGIN TO WO	ORK AT CLOVIS CH	RISTIAN SCHOOLS?						
SECTION	2: EDUCATI	ONAL BACKGROUND						
A. WHAT CREDENTIALS DO	YOU HOLD?	DATE OF EXPIRATION						
PLEASE LIST EVERY SCHOOL YOU	J HAVE ATTENDED	SINCE HIGH SCHOOL:						
Name & Location	DATES	DEGREE / DIPLOMA OR # OF HOURS	SPECIAL STUDIES OR MAJOR					
1.								
2.								
3.								
4.								
B. WHERE DID YOU GRADUA	TE FROM HIGH SC	HOOL?						

C.		BIBLE TRAINING	CREDITS EARNED
	1.	BIBLE & THEOLOGY	
	2.	CHRISTIAN EDUCATION	
	3.	OTHER FORMAL OR INFORMAL BIBLE TRAINING	
	4.	DO YOU PERSONALLY STUDY THE BIBLE CONSISTENTLY?	
	5.	LIST AND DESCRIBE ANY COURSES TAKEN IN CHRISTIAN PHILOSOPHY OF COURSES GIVING SPECIFIC TRAINING FOR CHRISTIAN DAY SCHOOLS:	EDUCATION AND/OR
D.		GENERAL DATA:	
	1.	WHAT COURSES IN THE TEACHING OF READING AND MATH HAVE YOU TA	KEN?
	2.	WHAT PLANS DO YOU HAVE FOR FURTHER TRAINING OR EDUCATION?	

SECTION 3: TEACHING/ADMINISTRATIVE EXPERIENCE PLEASE LIST ALL ACADEMIC TEACHING/ADMINISTRATIVE EXPERIENCE YOU HAVE HAD, LISTING THE MOST RECENT FIRST. **SCHOOL ADDRESS GRADE(S) DATES** 1. 2. 3. 4. 5. PLEASE LIST ANY OTHER TEACHING OR ADMINISTRATIVE EXPERIENCE YOU HAVE HAD, AGAIN STARTING WITH THE MOST RECENT FIRST. (THIS MAY INCLUDE: SUNDAY SCHOOL, YOUTH GROUPS, ETC.) 1. 2. 3. 4. 5.

SECTION 4: POSITION DESIRED							
WHAT EXPERIENCE DO Y	WHAT EXPERIENCE DO YOU HAVE IN ATHLETICS/SPORTS?						
WHAT EXPERIENCE DO Y	OU HAVE IN WORKING WIT	TH THE AGE LEVEL YOU DESI	RE TO LEAD/GUIDE?				
WHY ARE YOU INTEREST	ED IN AN ADMINISTRATIVE	POSITION?					
How do you feel abou	JT TEACHING A BIBLE CLA	SS ON YOUR PREFERRED LEV	/EL?				
DO YOU HAVE TRAINING	IN ANY OF THE FOLLOWIN	G:	<u> </u>				
REGULATIONS NMAA	☐ LEADING CHAPEL	☐ Office Work	☐ SPORTS (SPECIFY)				
□ NMPED REGULATIONS	☐ DISCIPLINE	☐ LEADING PROFESSIONAL DEV.					
☐ EVALUATION	☐ PARENT COMMUNICATION	GOVERNMENT STUDENT					
Supervision of Personnel	☐ YEARBOOK	☐ CURRICULUM					
☐ COMPUTER EXPERTISE	E (LIST):						

	SECTION 5	: CHRISTIAN EX	XPERIENCE AND	PHILOSOP	PHY
1.	WHEN DID YOU ACC	CEPT CHRIST AS YOU	R PERSONAL SAVIOR?	•	
2.	OF WHAT CHURCH	ARE YOU A MEMBER?			
3.	How often do yo	U ATTEND CHURCH?			
	☐ REGULARLY	☐ FREQUENTLY	☐ OCCASIONALLY	☐ SELDOM	☐ NEVER
4.	IF MARRIED, DOES YO	OUR SPOUSE EXPERIEN	ICE AND SHARE THE SA	ME CHRISTIAN PH	IILOSOPHY AS
	□YES	□NO			
	IS HE/SHE IN TOTAL A	AGREEMENT WITH YOU □NO	JR APPLICATION TO CL	OVIS CHRISTIAN	SCHOOLS?
5.	DESCRIBE YOUR PE	RSONAL RELATIONSH	IIP WITH JESUS CHRIS	T:	
6.	Discuss:				
	A. THE BIBLE AS TI	HE INFALLIBLE WORD	O OF GOD		

В.	THE TRINITY
C.	THE DEITY AND MISSION OF CHRIST
D.	THE DEFINITION OF A CHRISTIAN
	T
E.	THE FILLING AND WORK OF THE HOLY SPIRIT

	SECTION 6: EDUCATIONAL PHILOSOPHY
1.	STATE YOUR UNDERSTANDING OF A CHRISTIAN PHILOSOPHY OF EDUCATION:
2.	SHARE YOUR VIEWS ON THE FOLLOWING:
	A. Role of the teacher in the Christian school classroom
	B. Role of the parent in the education of their children
	C. CLASSROOM DISCIPLINE
3.	WHY DO YOU WANT TO JOIN THE MINISTRY AT CLOVIS CHRISTIAN SCHOOLS?

Section 7:	REFERENCES
PLEASE LIST THE FOLLOWING REFERENCES:	
FRIEND'S NAME:	Address:
	PHONE NUMBER:
PASTOR'S NAME & CHURCH NAME:	ADDRESS:
	PHONE NUMBER:
EMPLOYER'S NAME:	Address:
	PHONE NUMBER:
MAJOR PROFESSOR, IF RECENT AND ABLE TO EVAL (OR SOMEONE WHO HAS SUPERVISED YOUR WORK IN EDUC EXPERIENCE).	UATE: CATION OR OTHER PERSON, IF YOU HAVE NO EDUCATIONAL
PROFESSOR'S NAME:	Address:
	PHONE NUMBER:
	TRATOR EVALUATION TO THREE OF THE ABOVE PEOPLE. R THEIR CONVENIENCE TO BE MAILED DIRECTLY TO:
PO Bo	TIAN SCHOOLS DX 608 IM 88102
	CTED FOR AN INTERVIEW ES HAVE BEEN RECEIVED.
OR THE PROVISION OF SERVICES TO ALL EMPLOYEE SHALL BE DISCRIMINATED AGAINST IN EMPLOYMEN COLOR, AGE, SEX, MARITAL STATUS, VETERAN STA ALSO REQUIRES THAT COVERED ENTITIES PROVID DISABILITIES WITH NECESSARY ACCOMMODAT IT IS THE RESPONSIBILITY OF THE APPLICANT OR EM	TO PROVIDE EQUAL OPPORTUNITY IN EMPLOYMENT IS AND APPLICANTS FOR EMPLOYMENT. NO PERSON T BECAUSE OF SUCH INDIVIDUAL'S RACE, RELIGION, ATUS, NATIONAL ORIGIN, OR DISABILITY. THE LAW DE QUALIFIED APPLICANTS AND EMPLOYEES WITH TONS THAT DO NOT IMPOSE UNDUE HARDSHIP. IPLOYEE TO INFORM THE PERSONNEL DEPARTMENT ODATION IS NEEDED.
SIGNATURE:	



APPLICATION FOR EMPLOYMENT

Evaluations & Recommendations

CONFIDENTIAL INFORMATION ADMINISTRATOR EVALUATION - RECOMMENDATION Page 1 of 2

NAME OF PERSON FOR RECOMMENDATION:

(LAST) (FIRST) (MIDDLE)

has applied for an administrative position with Clovis Christian Schools. Your name was given as a reference. Please write in the space below your appraisal of the above candidate.

BE ASSURED WHATEVER YOU SAY WILL BE HELD IN THE STRICTEST CONFIDENCE.

PERSONAL STANDARDS	Poor 1	FAIR 2	GOOD 3	EXCELLENT 4	NOT APPLICABL E	SPECIFIC COMMENTS
Loyalty (submission to authority)						
Relaxed, open personality						
Commitment to excellence						
Good sense of humor						
Promptness						
Honest with self & others						
Good attendance						
Confidential						
Integrity						
Ability						
General appearance						

CONFIDENTIAL INFORMATION **ADMINISTRATOR EVALUATION - RECOMMENDATION** For: Page 2 of 2 GOOD **E**XCELLENT **Poor** FAIR Not **DEMONSTRATED COMPETENCE SPECIFIC COMMENTS** 1 2 3 4 **APPLICABLE** Open and flexible teaching personality Voice and speech patterns Ability to work cooperatively with other staff Maturity of judgment and ability to make realistic decisions Command of subject matter Preparation for lessons Classroom management and control Performance of a variety of critical teaching tasks Ability to evaluate students/teachers Fair and just attitude in dealing with students Please check predicted success as an administrator on the following scale: REQUIRES UNACCEPTABLE ACCEPTABLE COMPETENT COMMENDABLE SUPERIOR **IMPROVEMENT** 2 General comments: YOUR WRITTEN COMMENTS ARE ENCOURAGED. Included may be such items as: reliability, attitudes, effort, etc. (Use back of this page as necessary) NAME OF EVALUATOR (PRINTED) **POSITION SIGNATURE OF EVALUATOR** DATE Please Mail Recommendation to: **CLOVIS CHRISTIAN SCHOOLS** PO Box 608, CLovis, NM 88102



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