

~~XXXXXXXXXX~~  
Tiny Town Teacher Application  
"Love God, Love Others"

What position are you applying for?  Full Time  Substitute Today's Date: \_\_\_/\_\_\_/\_\_\_

**Vital Information**

Full Name: \_\_\_\_\_ Birth Date: \_\_\_/\_\_\_/\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

City: \_\_\_\_\_ Cell Phone: \_\_\_-\_\_\_-\_\_\_\_\_ Home: \_\_\_-\_\_\_-\_\_\_\_\_

How long have you lived in Texas? \_\_\_\_\_ Other states you have lived in? \_\_\_\_\_

Marital Status: \_\_\_ single \_\_\_ engaged \_\_\_ married \_\_\_ divorced \_\_\_ widowed

Spouse name: \_\_\_\_\_ Years married: \_\_\_\_\_ Anniversary date: \_\_\_/\_\_\_/\_\_\_

Children: Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth date: \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth date: \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth date: \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth date: \_\_\_/\_\_\_/\_\_\_

**Information church attend**

Name of church: \_\_\_\_\_ City/ State of church: \_\_\_\_\_

How long have you attended this church? \_\_\_\_\_ Name of Pastor: \_\_\_\_\_

Are you a born again Christian? \_\_\_ yes \_\_\_ no How long? \_\_\_\_\_

Please check the statements that apply to you.

- |                                  |                                   |                                 |                                                           |
|----------------------------------|-----------------------------------|---------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Believe | <input type="checkbox"/> Disagree | <input type="checkbox"/> Unsure | Believe the virgin birth and deity of Jesus Christ.       |
| <input type="checkbox"/> Believe | <input type="checkbox"/> Disagree | <input type="checkbox"/> Unsure | That Jesus is God's Son and only sacrifice for our sins.  |
| <input type="checkbox"/> Believe | <input type="checkbox"/> Disagree | <input type="checkbox"/> Unsure | That Jesus rose bodily from the dead.                     |
| <input type="checkbox"/> Believe | <input type="checkbox"/> Disagree | <input type="checkbox"/> Unsure | That a person must be born again to receive eternal life. |
| <input type="checkbox"/> Believe | <input type="checkbox"/> Disagree | <input type="checkbox"/> Unsure | In the infallibility of the Holy Bible.                   |
| <input type="checkbox"/> Believe | <input type="checkbox"/> Disagree | <input type="checkbox"/> Unsure | In eternal damnation for the lost.                        |

**Formal Education**

Provide the following information for all colleges, universities, junior or community colleges attended.

| <u>Institution</u> | <u>Dates Attended</u> | <u>Degree Earned</u> |
|--------------------|-----------------------|----------------------|
|                    |                       |                      |
|                    |                       |                      |
|                    |                       |                      |

Are you a certified teacher? Yes/No

Do you have a current CPR/First Aid/ AED License? Yes/No

**Employment History** (Please list chronologically, starting with your most recent position.)

| Position Held | Employer | Date | Full or Part Time |
|---------------|----------|------|-------------------|
|               |          |      |                   |
|               |          |      |                   |
|               |          |      |                   |

**Ministry Related Experience**

| Position Held | Ministry | Date | Paid or Volunteer |
|---------------|----------|------|-------------------|
|               |          |      |                   |
|               |          |      |                   |
|               |          |      |                   |

List three strengths

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List three weaknesses

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**About Yourself**

Special Interest & Talents

- |                                                 |                                                 |                                                 |
|-------------------------------------------------|-------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> teaching               | <input type="checkbox"/> assistant to leader    | <input type="checkbox"/> visitor follow up      |
| <input type="checkbox"/> crafts/sewing/painting | <input type="checkbox"/> creative writing       | <input type="checkbox"/> new believer follow up |
| <input type="checkbox"/> praise & worship       | <input type="checkbox"/> outreach               | <input type="checkbox"/> clerical skills        |
| <input type="checkbox"/> carpentry              | <input type="checkbox"/> greeter                | <input type="checkbox"/> providing refreshments |
| <input type="checkbox"/> sound & media          | <input type="checkbox"/> drama                  | <input type="checkbox"/> recruiting volunteers  |
| <input type="checkbox"/> story telling          | <input type="checkbox"/> musical instruments    | <input type="checkbox"/> organizing volunteers  |
| <input type="checkbox"/> intercessory prayer    | <input type="checkbox"/> publication/newsletter | <input type="checkbox"/> games & recreation     |

**Age Preferences**

Please rate your age preference (1= first choice - 10= last choice)

- \_\_\_ - Babies (ages 3 months - 1 yr)
- \_\_\_ - Toddlers (1 yr - 23 months)
- \_\_\_ - 2's
- \_\_\_ - 3's
- \_\_\_ - 4's
- \_\_\_ - Pre-K
- \_\_\_ - Music
- \_\_\_ - Discovery
- \_\_\_ - Computer/Library
- \_\_\_ - Other

**Character References**

Provide names, email address and phone numbers for 3 personal character references not related to you.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Background Information**

Has anyone ever brought or threatened to bring a civil claim against you alleging physical or sexual abuse or sexual harassment? Yes No

Have you ever been charged, arrested, or convicted of a felony or misdemeanor? Yes No

Have you ever terminated your employment or had your employment terminated or has your employer ever reprimanded you for reasons relating to allegations of physical or sexual abuse or sexual harassment by you? Yes No

Have you ever been reprimanded for harassment of another individual or other inappropriate behavior with another individual? Yes No

Is there anything in your past that might come up as a questionable issue? Yes No  
If yes, please explain? \_\_\_\_\_

\_\_\_\_\_

By signing below, I certify that the information contained in this application is complete, accurate, and not misleading in anyway. I authorize Lakeshore Church and its agents to contact references provided, as well as any sources not provided in order to obtain information regarding my character and fitness for a Mother's Day Out Teacher. Should my application be accepted, I agree to submit to the policies and procedures of Lakeshore Church and the Mother's Day Out Program, and to refrain from unscriptural conduct in the performance of my services on behalf of Lakeshore Church and Mother's Day Out.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_