

Veritas Florida
Faculty Application

I. Personal Information

Name _____

Last First Maiden/Middle

Social Security # _____ Date _____

Current Address _____

City _____ State _____ Zip Code _____

Phone _____ Cell # _____

E-mail Address _____ Position Desired _____

Are you legally eligible for employment in the United States? Yes _____ No _____

If no, please explain: _____

Date of Birth: (optional) ____/____/____ Spouse: (optional) _____

II. Educational History

<u>School and Location</u>	<u>Dates</u>	<u>Degree or Diploma</u>	<u>Major</u>	<u>Minor</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Post Graduate Courses (list courses) _____

Are you certified? Yes _____ No _____ In what state: _____

III. Professional History

Present Employment

School/Company: _____

Address: _____

Position Held: _____ Number of years teaching: _____

Reason for Leaving: _____

Grades/Subjects: _____

School Principal: _____ Phone: _____

Why do you desire a change from your present position? _____

Teaching Experience

School: _____

Address: _____

Position Held: _____ Number of years teaching: _____

Grades/Subjects: _____

Reason for Leaving: _____

School Principal: _____ Phone: _____

School: _____

Address: _____

Position Held: _____ Number of years teaching: _____

Reason for Leaving: _____

Grades/Subjects: _____

School Principal: _____ Phone: _____

IV. Placement Information

What grades or subjects are you **prepared** to teach?

What are your strengths/gifts for teaching?

Have you had any experience teaching the classical model? ____ Yes ____ No

Have you had any experience teaching Charlotte Mason methods? ____ Yes ____ No

V. Personal View

Please attach a brief profession of your Christian faith, the growth and development of your faith, and your present walk.

Church presently attending _____

How long? _____ Member? _____ Pastor _____

Denominational preference _____

Church activities involved in (please indicate the degree of regularity):

VI. Additional Information

Have you ever been terminated from a job, teaching or other? Yes _____ No _____

If Yes, please explain: _____

Has your teaching contract ever been not renewed? Yes _____ No _____

If Yes, please explain: _____

Have you ever had a problem in the area of child abuse/molestation or been accused or convicted of molesting children? Yes _____ No _____

If Yes, please explain: _____

Have you ever been convicted of a criminal offense (excluding minor traffic violations)?

Yes _____ No _____

If Yes, please explain: _____

Has an investigation been conducted or was one pending at the time of separation from any prior employment? Yes _____ No _____ If yes: explain _____

Do you have any physical handicaps or conditions preventing you from performing certain types of activities relating to youth or children's work? Yes _____ No _____

If Yes, please explain: _____

VII. References

Spiritual - A spiritual leader, other than your pastor, who knows you well.

Name _____ Phone _____

Professional - A person who has supervised your work in education.

Name _____ Phone _____

Name _____ Phone _____

If you have any questions, please feel free to call the school office at the number below.

Non-Discriminatory Policy: *It is and shall be the policy of Veritas Florida in the admission of students and in the hiring of employees, not to discriminate on the basis of the applicant's race, color, sex or national or ethnic origin. (You may waive the right to answer any questions under the heading of Personal Information.)*

Complete and mail to:

Robin Hair McEuen

Veritas Florida Administrator

5004 East Fowler Ave.

Suite C-158

Tampa, FL 33617

770.480.3586

SCAN AND EMAIL TO: robin@veritasflorida.com

OFFICIAL BACKGROUND CHECK

BUSINESS: *Veritas Florida*

REASON FOR BACKGROUND CHECK: Employment

ARE YOU CURRENTLY EMPLOYED BY OR SEEKING EMPLOYMENT AT
VERITAS FLORIDA? (YES OR NO)

I hereby authorize VERITAS FLORIDA to receive any criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency.

PLEASE PRINT CLEARLY

Full Legal Name:						
Last:		First:			Middle:	
Maiden Name:				Nickname:		
Street Address:				Daytime Phone:		
City:		County:		State:	Zip:	
Date of Birth:	Month	Day	Year	Sex:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Social Security Number:						
If a resident of Florida less than 7 years, please state previous residence: (If more than 2 residences, list on reverse side.)						
State _____	County _____	From _____	To _____	month / year	month / year	
Name used in this county: _____						
State _____	County _____	From _____	To _____	month / year	month / year	
Name used in this county: _____						

Signature of Applicant / Volunteer

Date

Veritas Florida

STATEMENT OF FAITH

I believe:

1. God is the Creator and Sustainer of all things and is the Source of all Truth.
2. God is Sovereign and maintains control over His entire universe. He is omnipotent.
3. The one living and true God exists eternally in three persons - Father, Son, and Holy Spirit.
4. God has revealed Himself in a general way in His world and universe, and in a specific way in the Scriptures of the Old and New Testaments.
5. The Bible is the inspired Word of God, the only inerrant and infallible rule of faith and practice.
6. In the deity of our Lord and Savior Jesus Christ, in His sinlessness, in His miracles, in His vicarious atonement by the shedding of His blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in His return in power and glory.
7. All individuals are lost in sin apart from Jesus Christ, and that the only way of salvation is through faith in Jesus Christ enabled by the Holy Spirit.
8. Salvation is by God's grace alone and that Christ's vicarious atonement on the cross secured our salvation.

Signature of Applicant

*Your signature signifies your understanding and agreement of the above Statement of Faith.