



JOB APPLICATION

Lighthouse Private Christian Academy is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below:

Applicant Information

First Name	Last Name	Middle Initial
SS#	DOB:	Maiden Name:

Address: _____

City, State and Zip Code: _____

Telephone Number: _____

Email Address: _____

Date of Application: _____

Employment Position

Position(s) applying for: _____

How did you hear about this position? _____

What days are you available for work? _____

On what date can you start working if you are hired? _____

Salary desired: _____

Personal Information

Do you have any friends, relatives, or acquaintances working for Lighthouse Private Christian Academy Yes No

If yes, state name & relationship: _____



Are you 18 years of age or older?	Yes	No
Are you a U.S. citizen or approved to work in the United States?	Yes	No
What document can you provide as proof of citizenship or legal status?		

Will you consent to a mandatory controlled substance test?	Yes	No
Do you have any condition which would require job accommodations?	Yes	No

If yes, please describe accommodations required below.

Have you ever been convicted of a criminal offense (felony or misdemeanor)?	Yes	No
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If yes, please state the nature of the crime(s), when and where convicted and disposition of the case:

Job Skills/Qualifications

Please list below the skills and qualifications you possess for the position for which you are applying:

(Note: Lighthouse Private Christian Academy complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

Education and Training



High School

Name	Location (City, State)	Year Graduated	Degree Earned

College/University

Name	Location (City, State)	Year Graduated	Degree Earned

Vocational School/Specialized Training

Name	Location (City, State)	Year Graduated	Degree Earned

Are you claiming Veteran's Preference? Yes No , If so, Branch of Service: _____
 Dates of Service: _____

Previous Employment

Employer Name:	Job Title:	Supervisor Name:	Ending Salary:
Address:	City, State, Zip Code:	Begin Date:	End Date:

Reason for leaving:

Job Responsibilities:

Employer Name:	Job Title:	Supervisor Name:	Ending Salary:
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LIGHTHOUSE

PRIVATE CHRISTIAN ACADEMY

Address:	City, State, Zip Code:	Begin Date:	End Date:
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Reason for leaving:

Job Responsibilities:

Employer Name:	Job Title:	Supervisor Name:	Ending Salary:
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Address:	City, State, Zip Code:	Begin Date:	End Date:
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Reason for leaving:

Job Responsibilities:

Employer Name:	Job Title:	Supervisor Name:	Ending Salary:
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Address:	City, State, Zip Code:	Begin Date:	End Date:
Reason for leaving:			
Job Responsibilities:			
Employer Name:	Job Title:	Supervisor Name:	Ending Salary:
Address:	City, State, Zip Code:	Begin Date:	End Date:
Reason for leaving:			
Job Responsibilities:			

References



Please provide 3 personal and professional reference(s) below:

Reference	Contact Information

CERTIFICATION

(LIST ALL AREAS IN WHICH YOU HOLD VALID FLORIDA AND/OR OUT-OF-STATE TEACHING CERTIFICATES. NOTE: APPLICANTS HOLDING A CERTIFICATE FROM ANOTHER STATE MUST OBTAIN A PENNSYLVANIA CERTIFICATE IN ORDER TO TEACH IN PENNSYLVANIA PUBLIC SCHOOLS.)

AREA OF CERTIFICATION	ISSUING STATE	DATE ISSUED

- a. HAVE YOU ACQUIRED TENURE IN FLORIDA OR ANY OTHER STATE? _____
- b. IF YES, IN WHAT SCHOOL DISTRICT? _____
- c. DATE AVAILABLE FOR EMPLOYMENT _____
- d. IF YOU ARE NOT EMPLOYED FULL TIME, ARE YOU INTERESTED IN BEING PLACED ON OUR SUBSTITUTE LIST?
Y N
- e. IF YES, SHORT TERM? Y N LONG TERM? Y N

AT-WILL EMPLOYMENT

The relationship between you and the Lighthouse Private Christian Academy is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by Lighthouse Private Christian Academy. No representative of Lighthouse Private Christian Academy has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will," and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either our Executive Vice-President/Chief Operations Officer or the Company's President.



LIGHTHOUSE

PRIVATE CHRISTIAN ACADEMY

Signature _____

Printed Name _____

Date _____