



Community Christian Academy
4594 Columbia Road ♦ Martinez, Georgia ♦ 30907
706-426-8881

Staff Application

This application is to be completed by all those desiring a position at Community Christian Academy. All information must be accurate and entirely completed. Any false information will be grounds for denial of application. Please submit your resume` along with this application.

Legal Name: _____
 Last First Middle

Address: _____
 Street

 City State ZIP

How long at this address? _____ If less than five years, give previous address and number of years below:

Previous address: _____ Years: _____

Primary Contact Number: (_____) _____ Secondary Number: (_____) _____

Best time to call: _____

Email Address: _____

Male Female Birthday: _____

Marital status: _____ Spouse's Name: _____

Desired Position: _____

Please list any degrees/certifications that you hold and the establishment from which it was granted.

Employment History (Last 5 Years- Please note any additional on resume.)

Employer's Name: _____ Time Employed: _____

Contact Name/Number: _____

Reason for Leaving: _____

Employer's Name: _____ Time Employed: _____

Contact Name/Number: _____

Reason for Leaving: _____

Employer's Name: _____ Time Employed: _____

Contact Name/Number: _____

Reason for Leaving: _____

Describe any additional leadership/volunteer experience you have had with children:

List any training or education that has prepared you to work with children:

Please briefly describe your personal relationship with Jesus Christ:

What church do you attend? _____

Are you a member? _____ Do you attend regularly? _____

In what ministries are you currently involved? _____

The questions below are part of the process to help provide a safe and secure environment for our children. All information is held strictly confidential by the Community Christian Academy staff.

Have you had any experiences that might make it difficult for you to minister to children at CCA? _____

Have you ever been accused or convicted of the use or sale of illegal drugs? _____

Have you ever used illegal drugs? _____

Have you ever been hospitalized, treated for, or struggled with alcohol or substance abuse? _____

Have you ever been charged with a misdemeanor or felony? _____

Are you engaged in any conduct that is contrary to the teachings of the Bible? _____

Do you have any health issues that could place the children of CCA at risk? _____

Have you ever been denied legal custody of your children in any legal proceedings including divorce decrees or settlements? _____

If you answered yes to any of the above questions, please explain briefly:

Local Personal References (Must be 18 years old and not related to you)

Name: _____ Relationship: _____

Address: _____ Phone: _____

Name: _____ Relationship: _____

Address: _____ Phone: _____

Name: _____ Relationship: _____

Address: _____ Phone: _____

Applicant's Statement

I hereby authorize Community Christian Academy to verify all information contained in this application with any references, my past or present employers, or any other appropriate personnel at my present or past employers, churches, or other organizations, and any individuals to disclose any and all information to Community Christian Academy. I release all such persons or entities from liability that may result or arise from Community Christian Academy's collections of all such evaluations or information or its consideration of my application.

Applicant Signature

Date

DISCLOSURE and AUTHORIZATION – BACKGROUND INVESTIGATION

In connection with my application for employment or to serve as a volunteer with Community Christian Academy, I understand that a “consumer report” and/or “investigative consumer report”, as defined by the Fair Credit Reporting Act (15 U.S.C. § 1681), will be requested by Community Christian Academy for employment or volunteer purposes, whichever is applicable, from Protect My Ministry, Inc., (“Protect My Ministry”), a consumer reporting agency as defined by the Fair Credit Reporting Act. These reports may include information as to my character, general reputation, personal characteristics or mode of living, whichever are applicable. They may involve interviews with sources such as my neighbors, friends or associates. The report may also contain information about me relating to my criminal history, credit history, driving and/or motor vehicle records, social security number verification, verification of education or employment history, worker’s compensation (only after a conditional job offer) or other background checks. Such reports may be obtained at any time after receipt of this Disclosure and Authorization and if I am hired or serve as a volunteer, whichever is applicable, throughout the course of my employment or volunteer service, as permitted by law and unless revoked by me in writing. Community Christian Academy also reserves the right to share my report with any third-party with whom I will be placed to work or volunteer with as a representative of Community Christian Academy. I understand that I have the right, upon written request made within a reasonable amount of time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report to Protect My Ministry, Inc., 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618 or 1-800-319-5581. For information about Protect My Ministry’s privacy practices, see www.protectmyministry.com.

Acknowledgement and Authorization

By signing below, I authorize Community Christian Academy or its authorized agents to obtain or prepare consumer reports or investigative consumer reports about me. I acknowledge receipt of a copy of the federal notice entitled *A Summary of Your Rights under the Fair Credit Reporting Act* and certify that I have read this Disclosure and Authorization as well as the summary document explaining my rights under the Fair Credit Reporting Act.

_____ TODAY’S DATE _____

Signature

LAST NAME _____ FIRST NAME _____ MIDDLE NAME/INITIAL _____

HOME ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

SSN _____ D/L or STATE ID _____ STATE ISSUED _____

EMAIL ADDRESS _____ FULL DOB _____

Please List Other Names Used _____



COMMUNITY CHRISTIAN ACADEMY
A MINISTRY OF TRINITY BAPTIST CHURCH

DOCTRINAL STATEMENT OF FAITH

We believe:

1. In the Verbal Inspiration and Authority of the Scriptures.
2. The Bible reveals God, the fail of man, the way of salvation, and God's plan and purpose in the ages to come.
3. In God the Father, God the Son, and God the Holy Spirit.
4. In the Deity, Virgin Birth, and bodily resurrection of Jesus Christ.
5. The salvation is "by grace" plus nothing and minus nothing. The conditions to salvation are repentance and faith.
6. That men are justified by faith alone and are accounted righteous before God only through the merit of our Lord and Savior, Jesus Christ.
7. In the visible, personal, and premillennial return of Jesus Christ
8. In the everlasting conscious blessedness of the saved, and the everlasting conscious punishment of the lost.

I have read and fully understand Community Christian Academy's doctrinal statements of faith.

Signature _____ Date _____