



First Baptist Christian School

Non-Teacher Employment Application:

4141 Pontchartrain Dr. ~ Slidell, LA 70458 ~ 985-643-3725 ~ Fax 985-445-1690

Mona Nelson, Principal mona.nelson@fbcslidell.org
www.fbcseagles.com

First Baptist Christian School, established in 1989, is dually Accredited through ACSI and AdvancED.

FBCS offers a Quality Education in a Christian Environment and believes each student can reach his or her full potential with hard work, discipline and encouragement. As we prepare our students to be well rounded, educated, individuals, it is our greatest desire to teach our students how to have a personal relationship with the Lord and walk in His righteousness. We look for staff members willing to join us in our goals.

INCLUDE the following items with this application:

1. **A time when you are most available for an interview.**
2. **The type of position you are looking for: _____**

Personal Information

LAST NAME FIRST NAME MIDDLE or MAIDEN

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SOCIAL SECURITY NUMBER

PHONE NUMBER

CELL NUMBER

ADDRESS

CITY

STATE

ZIP

EMAIL ADDRESS _____ @ _____

ARE YOU A CHRISTIAN ? _____ RELIGIOUS AFFILIATION: _____

NAME OF CHURCH WHERE YOU ARE A MEMBER: _____

❖ Involved in what ministries: _____

I, _____, GIVE FIRST BAPTIST CHRISTIAN SCHOOL PERMISSION TO USE WHATEVER MEANS NECESSARY TO VERIFY ALL STATEMENTS CONTAINED IN THIS APPLICATION. FURTHERMORE, I WILL SUBMIT TO BACKGROUND CHECKS AS REQUIRED BY STATE LAW.

Signature: _____ Date: _____

DATE AVAILABLE TO BEGIN EMPLOYMENT: _____

Prospective Employee Questionnaire

1. Have you ever been convicted of a felony or of a misdemeanor crime with the exception of a minor traffic violation?

If yes, describe. If no answer question number 2. _____

2. Have you ever been charged with a crime? If yes, were the charges dismissed and why? _____

3. Do you drink alcohol or smoke? _____ Frequency of use _____

4. Have you ever applied for a job that required a background check or a check through the LA Bureau of Investigation? _____

5. Have you ever been bonded or insured for fiduciary handling of money or for responsibilities associated with handling the affairs of others or property of any other person or entity? If so, whom? _____

6. Is there any other information you would consider pertinent to this application? _____

Work Experience

EMPLOYER /COMPANY: _____

LOCATION: _____

DATES OF EMPLOYMENT: _____

Reason for leaving:

EMPLOYER /COMPANY: _____

LOCATION: _____

DATES OF EMPLOYMENT: _____

Reason for leaving:

EMPLOYER /COMPANY: _____

LOCATION: _____

DATES OF EMPLOYMENT: _____

Reason for leaving:

EMPLOYER /COMPANY: _____

LOCATION: _____

DATES OF EMPLOYMENT: _____

Reason for leaving:

Personal References

- 1. Name: _____ Position/Title: _____
Phone: _____
Email: _____ @ _____

- 2. Name: _____ Position/Title: _____
Phone: _____
Email: _____ @ _____

- 3. Name: _____ Position/Title: _____
Phone: _____
Email: _____ @ _____

- 4. Name: _____ Position/Title: _____
Phone: _____
Email: _____ @ _____

BEGINNING HERE AND ON THE BACK, PLEASE WRITE YOUR PERSONAL TESTIMONY.