



New Hope Christian Academy

MISSION STATEMENT

New Hope Christian Academy is an urban, college-preparatory, Christian elementary school. We offer a challenging independent school education that affords our students opportunities for future learning.

STAFF APPLICATION

Name _____

Address _____ City _____ State _____ Zip _____

Telephone Number _____ Cell Phone Number _____

Email _____

- Position applying for
- Administrative Assistant
 - Accounting/Bookkeeping
 - Admissions Office
 - Bus Driver
 - Facilities/Maintenance & Custodial
 - Kitchen/Food Service
 - After Care Instructor
 - Summer Camp Instructor
 - Other _____

Please complete all applicable items and email to Ms. Kim Terry, Assistant to the Head of School at kterry@newhopememphis.org

I certify that the information which I have submitted in this application is true and correct to the best of my knowledge:

Signature

Date

PERSONAL STATEMENTS

Please respond to the following **on a separate sheet of paper** and **enclose with your completed application**.

1. Please write a personal statement of faith describing how your faith impacts your daily life.
2. Please state why you would like to work at a Christian school like New Hope Christian Academy.
3. Please describe other Christian ministries, extra-curricular activities, and/or personal experiences that have prepared you to serve at New Hope Christian Academy.
4. Please list any experience and/or expertise that would be beneficial for the job for which you are applying.

PERSONAL INFORMATION

Name _____
First
Middle
Last
Maiden (if applicable)

Date of Birth _____ Place of Birth _____
City
State
Zip

Social Security Number _____ (Used for background check)

Marital Status _____ Spouse's Name _____

Children (names and ages) _____

Are you a professing Christian? _____ Church Membership _____

How are you involved at your church? _____

What sports, clubs, etc. would you be willing to coach or lead? _____

Have you ever been convicted of a crime? ____ Yes ____ No (If yes, explain separately)

Do you have any known health related problems? ____ Yes ____ No (If yes, explain separately)

Please provide your profile names or websites for associated social networks (i.e. Facebook, Twitter, etc.), blogs or other websites: *

 *We will friend you using the profile, "New Hope". Please accept our requests in order for us to process your application.

PROFESSIONAL PREPARATION

Please list all colleges or universities attended. Include any degree work presently in progress. ***Please have the college/university registrar forward official transcripts to New Hope Christian Academy.***

COLLEGE/UNIVERSITY & LOCATION	DATES	MAJOR	MINOR	DEGREE EARNED

PROFESSIONAL EXPERIENCE

Please list professional experience starting with your present or last full-time or part-time position.

Place of Employment	Dates Employed	Position	Reason for Leaving

PERSONAL REFERENCES

Please list three references, excluding family members, who are qualified to speak of your personal character, Christian life, training and professional experience.

Name	Address	Phone	Occupation	Relationship

WAIVERS & CRIMINAL HISTORY AFFIDAVIT

RELEASE WAIVER

I release former employees of all liability for supplying information, personnel records and job performance appraisals.

Signature

Date

CRIMINAL HISTORY AFFIDAVIT

My signature below indicates my willingness for New Hope Christian Academy to initiate an appropriate background check.

Signature

Date

Thank you for your interest in serving at New Hope Christian Academy. We will carefully review the application you have submitted. An interview is required prior to being hired. We will contact you to set up an interview with our administrative staff. For more information about New Hope, please visit us at www.newhopememphis.org.

New Hope Contact Information:

New Hope Christian Academy
3000 University Street
Memphis, TN 38127
(901) 358 - 3183

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write to USDA Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 Or call 1-800-795-3272 or 1-202-720-6382 (TTY). USDA is an Equal Opportunity Provider and Employer.