

**Faith Community Christian School
Faculty Application**

Name _____ Date of Birth _____

Address _____ Phone _____

City, State, Zip _____

Cell phone _____

E-mail address _____

Your employer (if applicable) _____ Phone _____

Work schedule _____

Status of your health/disabilities _____

SPOUSE INFORMATION

Name of Spouse _____ Date of Birth _____

Spouse Employer _____ Phone _____

Work Schedule _____

Names and ages of children _____

Parent/child relationship: Are any of the children being home educated the offspring of parents who are divorced or legally separated? _____ Yes _____ No
If YES, please explain who has legal custody on a separate sheet of paper.

Parent/Teacher's educational background and experience (include grades completed, diplomas, degrees, etc.)

Have you accepted Jesus Christ as your personal Lord and Savior? _____

What church do you regularly attend? _____

Address _____

City, state, zip _____

Pastor's name _____ Phone _____

Are you a member in good standing? _____

What regular church activities are you involved in? _____
