





## **Employment Application**

It is the policy of this organization to provide equal employment opportunities to all qualified persons without regard to race, color, sex, age, national origin, ancestry, disability, military status or any other protected classification in accordance with applicable federal, state and local laws.

Please type or neatly print your answers in blue or black ink. An illegible application may preclude you from consideration.

PERSONAL INFORMATION			
Total No. 1	APARIA LAPRAL	l and h	
First Name	Middle Initial	Last N	iame
Address: Street and Apt#	City	State	Zip Code
Phone: ()	Email Address: _		
am an U.S. Citizen or otherwise	authorized to work in the United S	tates on an unrestric	cted basis:
Yes □No. If applicable, plea	ase list your visa type, visa # and o	expiration:	
vailability: □Full time □Part			
	-time / Internship / Student Teachi	na	
, — —	-time / Internship / Student Teachi		
Vhat hours are you willing to wor	· </th <th></th> <th></th>		
What hours are you willing to work When would you be able to start? How did you learn about the posit	k?ion for which you are applying (ple		f job posting site if
What hours are you willing to work When would you be able to start? How did you learn about the posite applicable)?	k?ion for which you are applying (ple		f job posting site if
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What hours are you willing to work When would you be able to start? How did you learn about the posit applicable)?  EMPLOYMENT HISTORY  List 10 years of employment history	ion for which you are applying (ple	ease include name o	f job posting site if
What hours are you willing to work When would you be able to start? How did you learn about the posit applicable)?  EMPLOYMENT HISTORY  List 10 years of employment histor  Present or Most Recent Emp	ion for which you are applying (ple	ease include name o	
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Prior Employer:					
Employer:			City/State:		
Your Position:	Du	ties:	<del> </del>		
Dates of Employment:	to				
Supervisor:Name				May we contact? YES	NC
Name Reasons for Leaving:					
Prior Employer:					
Employer:			City/State:		
Your Position:	Du	ties:			
Dates of Employment:	to				
Supervisor:				May we contact? YES	NC
Oupci visor		Title			
Reasons for Leaving:  EDUCATIONAL HISTORY					
Name Reasons for Leaving:	& SKILLS				
Reasons for Leaving:  EDUCATIONAL HISTORY  Graduate/Technical/Vocation	& SKILLS onal School:		_City/State:_		
Reasons for Leaving:  EDUCATIONAL HISTORY  Graduate/Technical/Vocation  Name:  Did you Graduate?   Yes  No	& SKILLS  onal School:  Attended From:_		_City/State:_ to		
Reasons for Leaving:  EDUCATIONAL HISTORY  Graduate/Technical/Vocation  Name:  Did you Graduate?	& SKILLS  onal School:  Attended From:	Ma	_City/State:_ to ajor:		
Reasons for Leaving:  EDUCATIONAL HISTORY  Graduate/Technical/Vocation Name:  Did you Graduate?  Yes No Degree: Special Honors or awards:  College or University:	& SKILLS  onal School:  Attended From:	Ma	_City/State:_ to ajor:		
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Reasons for Leaving:  EDUCATIONAL HISTORY  Graduate/Technical/Vocation  Name:	& SKILLS  onal School:  Attended From:_  Attended From:_	Ma	City/State:toajor:ajor:		

### **Skills & Activities**

Please list any other experience, job related skills, additional languages or other qualifications that should be considered in evaluating your qualification for employment:

# SPIRITUAL INFORMATION

ali mattai		nly inspired and infallible Word of God, our final authority in		
	rs of faith, truth and conduct			
rio, pieas	ве ехріаін.			
low ofte	n do you read your Bible? _			
low ofte	n do you pray?			
) Penomin	ational History			
enomina		, dates		
Denominat				
Denominat		, dates		
-	urrently have a church home			
_				
b.		do you attend? How long? How long?		
d.		good standing? How long? part of at your local church?		
	What activities are/were you a p	part of at your local church?		
	What activities are/were you a p			
d. Iave you	What activities are/were you a p	part of at your local church?		
d. Have you	What activities are/were you a p	ularly (weekly) for the past 12 months?   Yes No If no,		
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d. Have you olease expenses ob?  Do you e Alease octrinal	What activities are/were you a plant been attending church regulated by the contract of the coholic Beverages Yes No If	che following?  If yes, how often?  Iterate yes, how often?  Interior of at your local church?  Interior of at your local church?  Interior of at your local church?  If yes, how often?  Interior of at your local church?  Inter		

b. The Holy Spirit		
d. Healing  e. Spiritual Authority and Delegated Authority  give a brief description of how you came to receive your salvation through Jesus Christ:	b.	The Holy Spirit
d. Healing  e. Spiritual Authority and Delegated Authority  give a brief description of how you came to receive your salvation through Jesus Christ:		
d. Healing  e. Spiritual Authority and Delegated Authority  give a brief description of how you came to receive your salvation through Jesus Christ:	C.	Speaking or praying in tongues
e. Spiritual Authority and Delegated Authority		
e. Spiritual Authority and Delegated Authority	d.	Healing
e. Spiritual Authority and Delegated Authority		
give a brief description of how you came to receive your salvation through Jesus Christ:	e.	
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	give	e a brief description of how you came to receive your salvation through Jesus Christ:
My Christian Testimony	****	******************************
		My Christian Testimony

#### STATEMENT OF FAITH - WE BELIEVE

- The Bible is the inspired and only infallible and authoritative Word of God.
- There is one true God, eternally existent in three persons: God the Father, God the Son, and God the Holy Spirit.
- ❖ In the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death, in His bodily resurrection, in His ascension to the right hand of the Father, in His personal, future return to the earth in power and glory.
- ❖ In the Blessed Hope, the rapture of the Church at Christ's coming.
- In the fall and sinfulness of man and that the only means of being cleansed from sin is through repentance and faith in the precious blood of Christ.
- Regeneration by the Holy Spirit is absolutely essential to personal salvation.
- ❖ In Divine Healing of the human body provided through the redemptive work of Christ on the Cross.
- The Baptism of the Holy Spirit, according to Acts 2:4, 2:39, is given to believers who ask for it.
- The Church of Jesus Christ is the universal, spiritual body of believers from every tribe, tongue, kindred and race of peoples and is indwelt by God through the Holy Spirit and divinely empowered to fulfill the Church and her Great Commission on earth.
- ❖ In the sanctifying power of the Holy Spirit by whose indwelling the Christian is enabled to live a holy life.
- ❖ In the resurrection and final judgment of both the saved and the lost, the one to everlasting life and the other to everlasting damnation.
- ❖ In the new heavens and the new earth and the holy Jerusalem, the city of God, descending out of heaven and filled with God's glory.

a.	I fully support the Statement as written without mental reservations.
	Signature:
b.	I support the Statement except for the area(s) listed and explained on a separate piece of paper. The exceptions represent either disagreements or items for which I have not yet formed an opinion or conviction.
	Signature:

### FOR FACULTY POSITIONS IN VALEO ACADEMY

In order of preference, please indicate which grade(s) you prefer to teach with a 1, 2, and 3. Then, to the right, please indicate the grades/subjects in order of preference. ( ) Early Childhood / Preschool ( ) Kindergarten ( ) Elementary (which grades): ( ) Junior High: \_\_\_\_\_ ( ) High School (which subjects): Are there any grades that you would prefer not to teach or do not feel qualified to teach? Any subjects? Are you capable of, or willing to teach Bible as a subject to students? 

Yes No If no, please explain your reservations. Do you have a Teaching Certificate? ☐Yes ☐No If you do not hold a certificate, do you have plans to obtain one? ☐Yes ☐No Why do you want to work in a Christian School? As a Christian Academy, our philosophy and method of education differ from most public schools. Are you willing to undergo any training and take any seminars/classes required to prepare you to teach at Valeo? ☐Yes ☐No Please read the Valeo Academy Philosophy of Education (found on www.valeoacademy.com) and indicate your reaction below:

## CERTIFICATION AND AGREEMENT

I understand that Life Changers International Church/Valeo Academy/ Gregory Dickow Ministries (hereafter "LCIC") does not discriminate in its employment practices against any person because of race, color, sex, age, national or ethnic origin, ancestry, disability, military status or any other protected classification in accordance with applicable federal, state and local laws.

I hereby certify that the facts set forth in this initial application are true and complete to the best of my knowledge. I understand that discovery of falsification of any statement or a significant omission of fact may prevent me from being hired, or if hired, may subject me to immediate dismissal regardless of the time elapsed before discovery. If I am released under these circumstances, I further understand that I will be paid and receive benefits only through the day of release.

I authorize references and my former employers to disclose to LCIC any and all employment records, performance reviews, letters, reports, and other information related to my suitability for employment, without giving me prior notice of such disclosure. In addition, I hereby release LCIC, my former employers, references, and all other parties from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure. I waive the right to ever personally view any references given to the school.

I understand that I will undergo a background and criminal records check and will be asked to complete an Authorization to Obtain Consumer Report for the purposes of obtaining an investigative consumer report for consideration of employment. I understand and agree that any offer of employment that I may receive from LCIC is conditioned upon the receipt of background information, including criminal background information.

I understand that this is only an application for employment and that no employment contract is being offered at this time.

Name (please print)	
Signature of Applicant	Date

I certify that I have carefully read and understand the above statements.

