

*Application for Administrative Position*

# INTRODUCTION

Date of application:

Name:

(please print) LAST NAME FIRST NAME MAIDEN NAME IF MARRIED

Address: Home Phone:

 Work:

 Fax:

 Cell:

Postal Code: Email:

# EDUCATION

## Secondary School

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Location | Years Attended | Graduation Date |
|  |  |  |  |

***Post-Secondary***

*College/Bible College*

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Degree/Program | Major | Graduation Date |
|  |  |  |  |
|  |  |  |  |

*University*

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Degree/Program | Major | Graduation Date |
|  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| **3. TEACHING CREDENTIALS** |  |
| Do you presently hold a valid British Columbia teaching certificate, ***or*** | \_\_\_\_ Yes | \_\_\_\_ No |
| Are you eligible for a British Columbia teaching certificate? | \_\_\_\_ Yes | \_\_\_\_ No |
| British Columbia College of Teachers Certificate, ***or*** | \_\_\_\_ Yes | \_\_\_\_ No |
| British Columbia Independent Teaching Certificate | \_\_\_\_ Yes | \_\_\_\_ No |

Type: Number: Expiry Date:

Do you hold a teaching certificate from another jurisdiction? \_\_\_\_ Yes \_\_\_\_ No (If yes please answer the following)

Certificate Issued By Jurisdiction:

Level/Type: Number: Expiry Date: Please include a copy of your BC Teaching Certificate (College of Teachers or Independent Schools).

# TEACHING AND ADMINISTRATIVE EXPERIENCE

Please begin with your most current experience and include student teaching experiences

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School | Position | Grade Level | Dates | Courses Taught |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

# PROFESSIONAL RELATED EXPERIENCES

Please list the following:

Extra-curricular activities, interests and hobbies:

Please list professional development undertakings (with dates):

Please outline your philosophy and approach to education:

Please outline your discipline philosophy:

Please list any school related leadership experience:

# CHURCH LIFE

Are you involved in a Christian Church? \_\_\_\_ Yes \_\_\_\_ No If yes, please provide:

Church Name: Phone:

Church Address: Postal Code:

Pastor’s Name: Phone:

If no, please explain:

Please provide information about your spiritual journey:

1. **REFERENCES** *(please provide the amount of references indicated) 3 Professional References*

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Position | Email Address | Phone |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*2 Pastoral/ Personal References*

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Position | Email Address | Phone |
|  |  |  |  |
|  |  |  |  |

# AFFIRMATION

My signature below indicates that:

I have read the Statement of Faith of White Rock Christian Academy and that I agree with and support the ministry of the school. My application for a position at White Rock Christian Academy does not conflict with any other contracts or commitments I have made to other schools.

White Rock Christian Academy is committed to meeting the privacy standards established by the BC Personal Information Act (PIPA) and has established policies to define the school authority’s use, storage and disclosure of personal information. White Rock Christian Academy does not sell, lease or trade personal information to other parties. For more information on White Rock Christian Academy’s use, storage and disclosure of personal information please contact the privacy officer, David Michel, Head of School.

In accordance with PIPA, I give permission for White Rock Christian Academy to (please check any/all that apply):

\_\_\_\_\_ Directly contact individuals given as references in this application.

\_\_\_\_\_ Securely retain and use this information for hiring purposes at White Rock Christian Academy.

\_\_\_\_\_ Place staﬀ picture and business email address on the school website.

\_\_\_\_\_ Publish staﬀ picture in the school yearbook.

\_\_\_\_\_ Disclose this information to other Christian schools upon their request for hiring purposes.

Applicant’s Signature Date