

For Admin Only: Resume attached Background checked References checked
The following signed: Statement of Faith Code of Ethics Teacher Expectations

Notes for Board:

Date Received: _____

EAGLE ACADEMY

For School Years: _____
(Min. commitment of two years)

"Preparing our youth to SOAR" (Is. 40:31)

TEACHER APPLICATION

Name of Applicant _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

CONTACT NUMBER (_____) _____ EMAIL ADDRESS _____

Social Security Number _____ (for possible background check information)

How did you heard of Eagle Academy?

Courses qualified/interested in teaching:

Please also attach Resume

Please list any experience you have home schooling, working with home school organizations, or tutoring home schooled students: (if NOT on resume)

If you recommend or prefer a particular curriculum please list below and your reasons why.
(Please be specific in subject and grade level)

If you have a desire to have any of your children attend Eagle Academy please list their names/current grade:

If you have any student recommendations for Eagle Academy please list below along with contact information:

Please provide **two professional references** and **one personal reference** below:

Name: _____ Relationship: _____

Phone: _____ Email: _____

Address: _____ City/State/Zip _____

Name: _____ Relationship: _____

Phone: _____ Email: _____

Address: _____ City/State/Zip _____

Name: _____ Relationship: _____

Phone: _____ Email: _____

Address: _____ City/State/Zip _____

Declarations: Please initial each one below:

_____ I am offering this application for consideration by Eagle Academy for a position as Instructor. All information is true and accurate to the best of my knowledge.

_____ Eagle Academy does not discriminate on the basis of race, color, national origin, sex, age, religion, or disability in hiring independent contractors for Instructor or Staff positions.

_____ I understand that I am providing a service to Eagle Academy, but that the parents are ultimately responsible for the education of their own children.

_____ I am giving permission to members of the Eagle Academy Board of Directors to conduct a background check on me using the Social Security number that I have provided and to contact all the references I have provided. I hereby authorize representatives of Eagle Academy to verify all information provided in my application to become an independent contractor of Eagle Academy. I understand that verification of information may include, but not be limited to, a credit report, verification of employment, verification of past employment and criminal background check. I consent to this investigation and certify that all stated facts are true and it is understood that any misrepresentation or omission is cause for Eagle Academy to reject this application.

_____ I am willing to sign a Statement of Faith as a part of the interview and screening process.

(Printed name of applicant)

DATE

(Applicant signature)