



WILLISTON TRINITY CHRISTIAN SCHOOL
2419 9th Avenue West
Williston, ND 58801-3252
(701) 774-9056

EMPLOYMENT APPLICATION

(Please print) Application Date _____

PERSONAL

Name _____

Current Address _____ City _____ State _____ Zip _____

Phone _____ Cell _____ Other _____

How long have you been at this address? _____

Previous address if less than two years _____

Position you are applying for _____

OUR MISSION

To assist parents in providing an education that encourages academic excellence and social responsibility, taught in a Biblically based Christian context.

OUR STATEMENT OF FAITH

1. We believe there is one God eternally existing in three persons: the Father, the Son, and the Holy Spirit. (Deuteronomy 6:4, I Timothy 1:17, Matthew 28:19)
2. We believe the Bible is God's written revelation to mankind and is verbally inspired, authoritative, and without error. (II Timothy 3:16, II Peter 1:20-21)
3. We believe in the deity of Jesus Christ, His virgin birth, sinless life, miracles, death on the cross to provide for our redemption, bodily resurrection and ascension into heaven, present ministry of intercession for us, and His future return to earth in power and glory. (Philippians 2:6-8, Matthew 1:18-25, Hebrews 4:15, John 20:30-31, Romans 5:1-12, Acts 1:9-11)

4. We believe in the present ministry and deity of the Holy Spirit, that He performs the miracle of new birth in an unbeliever and indwells believers, enabling them to live a godly life of effective service. (John 14:16-17)

5. We believe that mankind was created in the image of God, but, because of sin, was alienated from God. The alienation can be removed only by receiving, through faith alone, God's plan for salvation, which includes repentance and confession of Jesus Christ as Lord and Savior. Baptism, being a significant biblical issue, will be referred to the student's family and clergy. (Romans 3:23, Romans 10:9-10, I John 1:9)

6. We believe in the resurrection of all the dead: the saved to eternal life dwelling forever with Christ, and the unsaved to everlasting judgment and condemnation. (John 5:24-29, Revelation 20:12-15)

7. We believe the church on earth is a spiritual unity made up of all Christians. (I Corinthians 12:12-13)

In signing below, I affirm that I agree, without reservation, with the above Statement of Faith.

Signature _____ Date _____

CHURCH INVOLVEMENT AND SERVICE

Church presently attending: _____

Current church activities: _____

Church responsibilities: _____ weekly _____ monthly _____ quarterly _____ other, please specify

PERSONAL VIEW

1. Describe your present relationship with the Lord.

2. How do you spend your time daily with the Lord?

JOB EXPERIENCE

Please enclose the names of three references, one of which is from your current pastor.

DRIVER LICENSE INFORMATION				
Do you have a valid driver license? <input type="checkbox"/> Yes <input type="checkbox"/> No Driver License Class _____ Issuing State _____				
Endorsements (check all that apply): <input type="checkbox"/> School Bus <input type="checkbox"/> Passenger Bus				
EDUCATION, TRAINING, CERTIFICATIONS				
Do you have a High School Diploma? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Other education after High School (most recent first):				
Name of School, City, State	# of Quarter or Semester Credits Earned	Graduated	Earned Degree AA, AS, AAS, BA, BS, Masters, PhD	Major or Course of Study
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Occupational License, Certificate or Registration	Number	Issued By	Expiration Date	
Occupational License, Certificate or Registration	Number	Issued By	Expiration Date	
ADDITIONAL INFORMATION AND SKILLS				
Describe volunteer work, community involvement, hobbies, or other qualification or skills:				
WORK EXPERIENCE (Current or most recent first)				
Employer		Telephone Number	From (Month/Year)	
Street Address/City/State				
Job Title			To (Month/Year)	

Duties/Skills/Equipment and Software Used:		
Hours Per Week		
Last Salary		
Last Supervisor		
Reason For Leaving		May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Telephone Number	From (Month/Year)
Street Address/City/State		
Job Title		To (Month/Year)
Duties/Skills/Equipment and Software Used:		
Hours Per Week		
Last Salary		
Last Supervisor		
Reason For Leaving		May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Telephone Number	From (Month/Year)
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Duties/Skills/Equipment and Software Used:		

Hours Per Week		
Last Salary		
Last Supervisor		
Reason For Leaving		May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Hours Per Week		
Last Salary		
Last Supervisor		
Reason For Leaving		May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No