



HYDE PARK BAPTIST SCHOOLS

EMPLOYMENT APPLICATION

Philosophy, Purpose and Objectives of Hyde Park Baptist Schools

Philosophy:

We believe that Hyde Park Baptist Schools exist to promote the welfare of each student. Believing that the chief need of each person is to come to know Jesus Christ as personal Savior, Hyde Park Baptist Schools will provide a quality, well-rounded, Christ-centered educational program. It is the ultimate goal of the school system to produce Christian individuals who are responsible, productive members of our society.

Purpose:

The purpose of Hyde Park Baptist Schools is to provide excellence in Christian education through a college-preparatory curriculum in the Austin, Texas community. The Hyde Park Baptist Schools are an integral ministry of Hyde Park Baptist Church.

Objectives:

- To provide quality educational opportunities to students at all grade levels by developing the whole student intellectually, emotionally, socially, physically, spiritually and ethically.
- To develop awareness that the mastery of the fundamental skills and thinking processes is essential to function in a democratic and global society.
- To produce individuals who possess a positive attitude toward themselves and others, toward family, toward church, toward work and toward civic responsibility.
- To promote education with a spiritual emphasis through a Christ-centered perspective.
- To present opportunities for students to come to know Jesus Christ as Lord and Savior.
- To present the Bible, God's Word, as the foundation for life and worthy to be studied.

HYDE PARK BAPTIST SCHOOLS
Austin, Texas

APPLICANT INSTRUCTIONS

Thank you for your interest in working at our school. We appreciate your application and look forward to the possibility of your joining our team. This sheet is for your information. Please tear it off and keep it for reference.

Please complete the application (resumes may be attached) and authorization for release of information form. Please print all information so it may be easily read. Be certain all forms are completely filled out and signed. Use the abbreviation "N/A" if a particular provision or section in the form is not applicable to you. **Incomplete applications will not be considered.**

Please note the following: This school does not subscribe to the workers' compensation program. We handle employee injuries that occur on the job through our own managed care approach to health benefits. You will have certain responsibilities in that regard if you are employed and wish to have such benefits available to you.

Your application will remain in our active files for a period of one year. Should an appropriate opening occur, your application will be reviewed along with others. It is not necessary for you to contact this office regarding any job openings after you have completed your application. If you are among the most qualified applicants for a position, an interview will be arranged. Please notify us in writing if your address or telephone number changes.

Employment decisions are made solely on the basis of qualifications to perform the work for the position for which you are applying. Qualifications include education, training and work experience and other factors that are relevant in determining job performance. Credentials and experience will be verified through schools, former employers and licensing / certification agencies, if applicable. As an Equal Opportunity Employer, decisions to hire and promote are made without regard to race, color, sex, national origin, pregnancy, physical or mental disability (unrelated to ability to perform the essential elements of the job), or age (as defined by law).

We appreciate your cooperation.



Hyde Park Baptist Schools

3901 Speedway
Austin, Texas 78751

Date of Application _____

____ **Elementary School** ____ **Secondary School**

____ **Professional** ____ **Middle School** ____ **Administration**

PERSONAL INFORMATION

Full Name: _____ SS# _____

Present Address: _____ Phone Number (____) _____

City _____ State _____ Zip _____

Permanent Address: _____ Phone Number (____) _____

City _____ State _____ Zip _____

Cell phone (____) _____ Email address _____

Have you ever been known by any name or names other than the one listed above? Yes ____ No ____

If yes, please list names. _____

NOTIFY IN CASE OF EMERGENCY

Name: _____ Relationship: _____

Address: _____ Phone Number (____) _____

City _____ State _____ Zip _____

Are you age 18 or older? Yes ____ No ____

If you are under 18 years of age, can you provide proof of your eligibility to work? Yes ____ No ____

Are you either a U.S. citizen or an alien authorized to work in the United States? Yes ____ No ____

Have you been convicted of a felony or misdemeanor within the last 5 years? Yes ____ No ____

Position(s) applying for: _____

On what date would you be available for work? _____

Do you wish to work: full time ____ part time ____ Salary desired _____

Are you currently on "lay-off" status and subject to recall? Yes ____ No ____

Have you ever filed an application with us before? Yes ____ No ____ If yes, give date: _____

Are you literate in English? Yes ____ No ____

Are you literate in another language? Yes ____ No ____ If yes, what language(s)? _____

EDUCATION

Education	Name/location	Circle year completed	Did you graduate?	College major/ degree received
Grade School	_____ _____ _____			
High School	_____ _____ _____	9 10 11 12		
Trade/Business/ Vocational	_____ _____ _____	1 2 3 4		
College	_____ _____ _____	1 2 3 4		
Graduate Studies	_____ _____ _____	#hours completed _____ Degree Received _____ _____		Major _____ Minor _____

Describe any specialized training, apprenticeship, skills and extra-curricular activities you were involved in. _____

Did you do student teaching? Yes ____ No ____

Grade level _____ Subject areas _____

Describe any honors you have received. _____

Please state any additional information you feel may be helpful to us in considering your application.

MILITARY SERVICE

Are you a United States Veteran? Yes ____ No ____ Dates of Service _____

Do you have a service-related VA-approved disability? Yes ____ No ____

Nature of military duty / training: _____

Use the space below to give us other information about special job-related skills/qualifications acquired from employment or other experience.

PROFESSIONAL LICENSES AND / OR CERTIFICATIONS

<u>Type/Number</u>	<u>Organization/State Issued</u>	<u>Date Issued</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever had an application for any type of professional or occupational license disapproved or any such license suspended, canceled, or revoked? Yes ____ No ____

List professional, trade, business, or civic activities and offices held. *(You may exclude memberships that would reveal sex, race, national origin, age, ancestry, disability or other protected status.)*

Do you have responsibilities that would limit your availability to work? Yes ____ No ____ If yes, please explain. _____

Do you have your own reliable transportation? Yes ____ No ____

EMPLOYMENT RECORD

Are you currently employed? Yes ____ No ____

We routinely contact an applicant's current employer for reference checks. Would this pose any particular difficulty for you? Yes ____ No ____ If yes, please explain. _____

Current or Last Employer**Salary** _____

Employer _____ From ____/____ to ____/____

Address _____ Phone (____) _____

City _____ State _____ Zip _____

Supervisor (Name and Title) _____

Position and duties _____

Reason for leaving _____

Next Previous Employer**Salary** _____

Employer _____ From ____/____ to ____/____

Address _____ Phone (____) _____

City _____ State _____ Zip _____

Supervisor (Name and Title) _____

Position and duties _____

Reason for leaving _____

Next Previous Employer**Salary** _____

Employer _____ From ____/____ to ____/____

Address _____ Phone (____) _____

City _____ State _____ Zip _____

Supervisor (Name and Title) _____

Position and duties _____

Reason for leaving _____

Next Previous Employer

Salary _____

Employer _____ From ____/____ to ____/____

Address _____ Phone (____) _____

City _____ State _____ Zip _____

Supervisor (Name and Title) _____

Position and duties _____

Reason for leaving _____

Next Previous Employer

Salary _____

Employer _____ From ____/____ to ____/____

Address _____ Phone (____) _____

City _____ State _____ Zip _____

Supervisor (Name and Title) _____

Position and duties _____

Reason for leaving _____

Please explain all periods of unemployment. _____

Have you ever been terminated from employment for any reason or requested to resign from any position? Yes ____ No ____ If yes, please explain. _____

REFERENCES

Do not include any persons who are related to you or who are previous employers.

	Name	Email Address	Phone	Occupation	Years Known
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

The following section must be completed if you are applying for a position which requires the operation of a motor vehicle owned or leased by the church, or used for church purposes.

Driver's License Number _____ State _____

Expiration Date _____

ACCIDENT RECORD

List all accidents in which you were involved as a driver during the preceding five (5) years.

<u>Date</u>	<u>Nature of Accident</u>	<u># of Fatalities</u>	<u># Persons injured</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TRAFFIC VIOLATION RECORD

List all violations of motor vehicle law or ordinances (other than violations involving only parking) of which you were convicted or forfeited bond or collateral during the preceding five (5) years.

<u>Date</u>	<u>Type of Violation</u>	<u>Location</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you have been convicted in the past five (5) years of driving while intoxicated or under the influence, please explain. _____

CHRISTIAN TESTIMONY

The religious beliefs of each and every employee of **Hyde Park Baptist Schools** are important to promote our mission and to meet the needs of the people we serve. Therefore, please answer the following questions.

Are you a Christian? Yes ____ No ____ Do you use tobacco? Yes ____ No ____

Do you use alcoholic beverages? Yes ____ No ____ Do you use recreational drugs?

Yes ____ No ____

Please make a statement about your Christian life. _____

Please relate briefly your personal experience with Christ. _____

While we believe a Christian’s personal life and activities are a matter of personal commitment to Christ, we also believe an employee of **Hyde Park Baptist Schools** has a responsibility of Christian influence and daily example in word and deed. Would it be your Christian commitment to so conduct yourself that your Christian testimony would in no way be impaired?

Yes ____ No ____

Denominational affiliation _____

Church membership _____

Address _____

Are you presently involved in the work of your church?

Frequently ____ Occasionally ____ Infrequently

In what ways are you involved? _____

I certify that all information given on this application is true, correct and complete to the best of my knowledge. I also certify that I have accounted for all of my work experience and training on this application, and that I have not knowingly withheld any fact or circumstance which would, if disclosed, affect my application unfavorably.

Hyde Park Baptist School is hereby authorized to make any investigation of my work, education and background history through any investigative agencies or bureaus of its choice. I release all parties named herein from all liability of any damages resulting from furnishing such information. This inquiry, if made, may include information as to my character and general reputation. I authorize any inquiry to be made on any information contained in this application if I am considered for employment. I agree to furnish additional information as may be required to complete my employment file. I understand that discovery of misrepresentation or omission of facts herein will be cause for immediate dismissal.

I understand that any employment by this church will be on a probationary basis and that I may be discharged without recourse. If employed by Hyde Park Baptist Schools, I agree to abide by its rules and regulations.

I understand that as a condition of employment, I may be required to submit to a drug screen and to a history and mobility screen and that my employment is further conditioned on the results of such screen. If I am terminated for failure to pass such required screens, I understand that I have no recourse against the church for such action.

The position for which I have applied requires that I be alert at all times to potential safety hazards or dangerous situations. If I accept an offer of employment, I will be required to recognize potentially dangerous or hazardous conditions and to take the appropriate steps to prevent an injury from occurring to myself or to any of my fellow employees. I will also be required to report all hazardous conditions to my supervisor and, if possible, I will be required to correct the situation myself so as to render it safe. I also understand that the positions I have applied for have certain other physical and mental requirements that will be described to me in detail. I also understand that my employment, both initial and continued, may be conditioned upon maintaining a favorable health evaluation. If requested, I agree to submit, at any time, to a physical examination, including a drug and alcohol screen, to be performed by a qualified medical doctor chosen by Hyde Park Baptist Schools. Such examination will be paid for by Hyde Park Baptist Schools. I also agree that all information concerning said physical examination and drug and alcohol screen may be supplied to Hyde Park Baptist Schools or to an authorized agent of this church, upon their request and in accordance with applicable law.

I further understand that this is an application for employment and that no employment contract is being offered. I understand that if I am employed as a certified teacher, I shall be governed by TEA regulations relating to terminating employment, and I understand that if employed in any other position, such employment is for an indefinite period and can be terminated at will by either party, with or without notice, at any time, for any or no reason. I further understand that as an employee, I am subject to changes in wages, conditions, benefits and operating policies.

Date

Signature



BACKGROUND CHECK FORM

DATE: _____

NAME : _____
(include middle name or initial)

MAIDEN NAME (if applicable): _____

SOCIAL SECURITY NUMBER: _____

BIRTH DATE: _____
(month, day, year)

DRIVERS LICENSE NUMBER: _____ STATE: _____

PERMISSION FOR BACKGROUND CHECK: _____
(signature)

ADDRESSES: CURRENT: _____

FROM _____ TO _____ (date)

PREVIOUS 7 YEARS: _____

FROM _____ TO _____ (date)

(continue on back with additional addresses)

For office use only: RESULTS (documentation attached): _____ PERSON CONDUCTING THE CHECK: _____ DATE: _____ (signature)
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