



# The Academy for Classical Education

## APPLICATION FOR EMPLOYMENT

(WE ARE AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER)

The terms "School", "We" and "Us" shall refer to the Academy for Classical Education

### APPLICANT'S STATEMENT

I understand that the School is committed to providing equal opportunity in all employment practices, including but not limited to selection, hiring promotion, transfer, and compensation to all qualified applicants and employees without regard to age, race, color, national origin, sex, religion, handicap or disability, or any other category protected by federal, state, or local law.

I authorize former and present employers, and professional, work, and personal references listed in the application and any other individuals I may name, to give the School or its designee any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release such parties from all liability for any damages that may result from furnishing same to the School. I also authorize the School to provide truthful information concerning my employment with it to future employers and I agree to hold it harmless for providing such information.

I understand that the School reserves the right, to the extent permitted by law, to require drug and alcohol screening tests of an applicant or an employee either prior to employment or any time during employment and I hereby give my consent to any such tests. I consent to the release of the results of any such tests to the School or its designee. I release the School and its designee from any and all liability and damages which may result or arise from any drug test or the provision of information in connection with such a test.

I understand that this employment application and any other School documents are not promises of employment. If I am hired and not employed pursuant to a contract of employment that contains a specific duration of employment, I understand that my employment will be on a trial period for ninety (90) days from the date of my hiring, and that I will remain an at-will employee thereafter. I further understand that, if I am employed, I can terminate my employment at any time with or without cause and with or without advance notice, and that the School has a similar right. I understand that no manager, representative, or agent of the School has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, except that the President may do so in writing. If I am hired under a contract, the contract will control the terms of my employment.

The information given by me on this application and during the interview process is true and complete in all respects, and I agree that if the information is found to be false, misleading, or unsatisfactory in any respect (in the School's judgment) that I will be disqualified from consideration for employment or subject to immediate dismissal if discovered after I am hired.

I CERTIFY THAT I HAVE RECEIVED A SEPARATE WRITTEN NOTIFICATION THAT THE SCHOOL MAY OBTAIN A CONSUMER REPORT ON ME FOR USE IN CONNECTION WITH MY APPLICATION AND, IF I AM HIRED, MY EMPLOYMENT WITH THE SCHOOL. I AUTHORIZE THE SCHOOL TO OBTAIN THIS REPORT.  
THIS APPLICATION WILL BE CONSIDERED "ACTIVE" FOR A MAXIMUM OF THIRTY (30) DAYS  
IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THESE STATEMENTS.

**Applicant's Signature**

**Date**

### PERSONAL DATA

Last Name

First Name

Middle Name

Social Security Number

**PERSONAL DATA**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Address	Current City	Current State	Current Zip

Are you 18 years of age or older?  Yes  No

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Previous Address	Previous City	Previous State	Previous Zip

Email Address

<input type="text"/>	<input type="text"/>	<input type="text"/>
Daytime Phone	Cell Number	Other

**POSITIONS**

List, in order of preference, the positions you desire.

	Position	Grade Level	Subject
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you are not employed full time, are you interested in the following position types? Part-time?  Yes  No  
Substitute?  Yes  No Short-Term?  Yes  No Long-Term Substitute?  Yes  No

**CERTIFICATION**

List all areas in which you hold a valid Georgia and/or out of state teaching certificate.

	Area	Issuing State	Date Issued
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>

**EDUCATIONAL BACKGROUND**

	<b>College/University</b>		
School/Institute	Major/Minor	Degrees or Credits Earned	Average GPA

	<b>Graduate Study</b>		
School/Institute	Major/Minor	Degrees or Credits Earned	Average GPA

**STUDENT TEACHING**

Grade/Subject Area Taught	Name and Address of School	College Supervisor	Supervising Teacher

**ADDITIONAL INFORMATION**

Please describe any other experience that you have which would be relevant to the job for which you are applying.

--

**REFERENCES**

Name	Position	Email Address	Phone

**EXPERIENCE**

Please fill-in the section in its entirety. List the name of your present and previous employers in chronological order with the present or last employer listed first. Include all part-time and seasonal employment. If self-employed, provide the name and supply business references. DO NOT ANSWER "SEE RESUME"

**Employer 1**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------

Start Date

End Date

Starting Salary

Ending Salary

Name of Employer

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------

Employer's Address

City

State

Zip

Phone

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Your Title

Supervisor's Name & Title

Reason for Leaving

List your duties and responsibilities

**Employer 2**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------

Start Date

End Date

Starting Salary

Ending Salary

Name of Employer

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------

Employer's Address

City

State

Zip

Phone

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Your Title

Supervisor's Name & Title

Reason for Leaving

List your duties and responsibilities

**Employer 3**

Start Date

End Date

Starting Salary

Ending Salary

Name of Employer

Employer's Address

City

State

Zip

Phone

Your Title

Supervisor's Name & Title

Reason for Leaving

List your duties and responsibilities

**Employer 4**

Start Date

End Date

Starting Salary

Ending Salary

Name of Employer

Employer's Address

City

State

Zip

Phone

Your Title

Supervisor's Name & Title

Reason for Leaving

List your duties and responsibilities

**BACKGROUND INFORMATION**

Please explain fully any gaps in your employment history. Be sure to account for all periods of time including military service and any period of unemployment.

List any other names which you may have used and which will be necessary to verify prior employment.

May we contact your current employer?  Yes  No

If no, please explain.

Have you ever worked for ACE before?  Yes  No

If yes, list the dates and positions.

Do you have any friends or relatives, currently, employed with ACE?  Yes  No

If yes, list names and relationship.

Have you ever plead guilty, or no contest to, or been convicted of any misdemeanor or felony?  Yes  No

If yes, please list the dates and details.

Due to an arrest, are you currently out on bail or on probation?

Yes  No

If yes, please explain.

*NOTE: Answering "Yes" to the questions does not constitute an automatic bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. (Do not include minor traffic citations and arrests or convictions which have been sealed or expunged in answering questions.)*

Do you have any commitments to any other employer which may affect your employment?

Yes  No

If yes, please explain.