

STAFF EMPLOYMENT APPLICATION



Email to: info@logoschristianschool.org

Applicant: Please complete this form and include a separate sheet for answers to the personal response questions, along with your resume and college transcripts.

Personal Data

Name: _____ Telephone: _____

Address: _____ Mobile Phone: _____

Email: _____

City _____ State _____ Zip _____ Application Date: _____

Available Date: _____

Indicate position(s) for which you are applying: Full Time Part Time Half Time

Position Type: Director Teacher Teacher Asst. Admin Other

Date of Birth: _____

Emergency Contact: _____
Name _____ Phone _____

Church Attendance _____

Have you ever been convicted of a felony offense? Yes No

If Yes, please explain _____

**Conviction of offense does not result in disqualification of employment.*



LOGOS
CHRISTIAN SCHOOL

MAILING ADDRESS

501 Accent Drive, Plano, TX 75075

PHONE NUMBER

972-437-3493

EMAIL ADDRESS

admin@logoschristianschool.org

Education Data

High School name and location: _____

Diploma Received? Yes No

Undergraduate college/university, location _____

Degree Major: _____ Degree Date: _____

Degree Minor: _____ Degree Date: _____

Graduate Education School and Location: _____

Degree: _____ Major: _____

Other training or preparation relevant to this position: _____



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Work Experience

List all other work or military experience

EMPLOYER	JOB TITLE	START DATE & END DATE	REASON FOR LEAVING	ENDING SALARY

Other Experience

List other experiences which you feel strengthen your application

Recognition Data

List honors or other areas of achievement you've received

List of Professional Organizations to Which You Belong

Personal Interest Data

Please list your hobbies, interests, travel, etc.



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Questions for Personal Response

Describe your testimony of conversion. (A brief testimony will suffice for this application)

Explain what you consider to be the function of a Discipleship Institute

Please explain your reason for seeking a position at Logos Christian School

References

Name:

Phone:

Name:

Phone:

Name:

Phone:

Signature

Date:



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