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| **Olive** OliveTreeLogo **Tree***Supporting the home-school family* *by providing a quality program grounded in a Biblical worldview.* |
| **Teacher Application** |
|  | **Date:** |   |
| **Name:** |  | **Phone:** |  |
| **Address:**  |  |
| **Current Occupation:** |  | **Hrs/Days per week:** |  |
| **Employer:** |  | **Work Phone:**  |  |
| **Email Address:** |  | **Cell Phone:** |  |
| **Marital Status:** Select | **Spouse’s Name:**  |  |
| **Number Of children:** | 0 | **Ages of Children :**  |  |
| **Children’s Educational Background:** |  |
| **Do you desire to enroll any of your children in OliveTree?**  |  |
| **How did you hear about OliveTree:**  |
|  |
| **Your Education Level:**  |  |
| **List Degrees and Schools Issuing Degrees.** |
| **Degree:** Choose an item. |  |
| **Degree:** Choose an item. |  |
| **Degree:** Choose an item. |  |
| **Are you a Colorado Certified Teacher (not required)?** Choose an item. |
| **Are you certified in another state?** Choose an item. |
| **What subjects are you certified/qualified to teach?**  |
|  |
| **What particular subject(s) are you interested in teaching?** |  |
|  |
| **Please describe your work or teaching experiences related to the subjects you are interested in teaching or describe your Admin experience. Use the back if needed.** |
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| **With what age level do you prefer to work?** K-5th [ ] 6th – 8th [ ] 9th-12th [ ]  |

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| **\*Have you read our mission statement and statement of faith?** Choose an item. |
| **\*Do you agree with our mission statement and statement of faith?** Choose an item. |
| \*documents available on website [www.olivetreeschool.org](http://www.olivetreeschool.org), Enrollment/Participation Agreement |
| **Please discuss any areas of the statement of faith with which you disagree.** |
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| **Please describe how you came to know Jesus Christ as your Lord and Savior (short testimonial).** |
|  |
| **Regarding your local church, do you attend regularly or are you a member?**  | Choose an item. |
| **What Church?**  |  |
| **Pastor’s Name:** |  | **Phone:**  |  |
| **What other activities are you involved in outside the home:** |
|  |
| **Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor or adult?**  | Choose an item. |
| **If yes, please explain:** |  |
|  |
| **Would you agree to allow us to conduct a security/background check?** | Choose an item. |
| **Please list three references (non-relative) with phone numbers:** |
| **1.** | **Name:** |  | **Phone Number:** |  |
| **2.** | **Name:** |  | **Phone Number:** |  |
| **3.** | **Name:** |  | **Phone Number:** |  |
| Please mail this completed form to: Ron and Barbara Frasco2912 Rocky Mountain CT., Ft. Collins, Co. 80526Or Email: barbarafrasco@gmail.com |