

CERTIFIED TEACHERS AND PERSONNEL

APPLICATION PROCESS:

Please send a resume and cover letter to:

Robert Guillaume
3205 W. 25th St.
Anderson, IN 46011

Or email letter and resume to:
rguillaume@goapa.org

SELECTION PROCESS: Once the resume and cover letter have been received, the Commandant may contact the candidates by phone or email. An application will be provided. The Anderson Preparatory Academy selection committee will interview the applicants selected and will make recommendations to the Commandant.

Anderson Preparatory Academy

(765) 649-8472
E-MAIL: info@goapa.org

www.goapa.org

Anderson Preparatory Academy shall not discriminate against any student, teacher, or employee on the basis of race, religion, gender, or national origin. Furthermore, in regards to students, the school admits students of any race, religion, gender, color, national and ethnic origin, and disability to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, religion, gender, color, national or ethnic origin, or disability in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school administered programs.

3/18/2009

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Please complete all information as requested. You may submit an additional letter of introduction as well as a VITA information page if you desire. Thank you for your interest in Anderson Preparatory Academy. Please type or print information.

POSITION DESIRED: _____ Certified Teacher _____ Non-certified Assistant _____ Substitute Teacher
_____ Volunteer _____ Other: Please describe. _____
Date: _____

Last Name _____ First Name _____ M.I. _____

(Before employment at our school, identity must be confirmed with a valid driver's license or other photographic identification. Please provide a copy with application materials.)

Do you have a current driver's license? _____ Yes _____ No _____ License Number _____

Present Address: Street _____ City _____ State _____
Zip _____

Home Phone _____ Work Phone _____
(Optional) Cell Phone _____ E-MAIL _____

Please write briefly about the work you would like to do at Anderson Preparatory Academy:

3/18/2009

As a certified teacher, please complete the following information:

_____ Type of License _____ Exp. Date _____ License Number
Special Education Certification and Areas? _____

Has your teacher license ever been suspended? ____ Yes ____ No

If yes, please explain circumstances. (Attach additional sheets if necessary.)

DATE YOU WOULD BE ABLE TO BEGIN? _____

What is the minimum time commitment you can make? _____ (Days / Hours)

Which days are you available to work during the week? _____

Have you ever been charged or convicted of or pleaded guilty to any crime? ____ Yes ____ No

Have you ever been charged, convicted, or pleaded guilty to any type of child abuse? ____ Yes ____ No

(*If yes to either above question, please explain with an attached page.)

Please include a background criminal check obtained from the Indiana State Police that is no older than six months with this application. Before employment, you will also have to have a national criminal check that will be conducted by the school. Please sign the "Background Check" authorization included with the application.

Is there any fact or circumstance involving your background that would call into question your being entrusted with the supervision, guidance, and care of children? ____ Yes ____ No

(If yes, please attach an explanation page.)

Are you able to speak Spanish or have you had Spanish language courses? ____ Yes ____ No

If no, are you willing to receive training in the Spanish language? ____ Yes ____ No

HISTORY AND PRIOR WORK WITH CHILDREN:

List all previous work, paid or volunteer, you have done with children.

Name of Organization Address Phone Number Dates

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3/18/2009

Personal References:

Name Address Phone Relationship

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Professional References:

Name Title Address Phone Working Relationship

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Please list your educational background.

It is required that you include an official transcript from the universities or colleges attended before employment.

University Attended Dates Degree? Describe? G.P.A.

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Please include any other materials, (written, printed, digital), that would further enhance your candidacy for a position at Anderson Preparatory Academy. Thank you for taking the time and effort to be considered for a position at our school.

*I understand that any information that proves to be false or misleading will be grounds for dismissal in the future.

_____ Signature

_____ Date

3/18/2009

Anderson Preparatory Academy

BACKGROUND CHECK AUTHORIZATION for EMPLOYMENT CONSIDERATION

I, _____, submit this background check authorization for the Anderson Preparatory Academy to meet the guidelines provided by the Ball State University's application for a charter agreement. I certify that all of the information provided in my resume and application is true and accurate to the best of my knowledge. I also certify that the following information, which should facilitate the background check process, is also accurate, true and correct to the best of my knowledge:

Other names or aliases you are known by: _____
Have you ever been convicted of a criminal offense? _____
If so, please give explanation: _____

I hereby give my written consent to any and all investigation and checks into my background deemed relevant to the consideration of the application, including, but not limited to, a criminal history check with the Indianapolis Police Department and the Indiana State Police and a national criminal background history check and/or a check of my credit history. I hereby authorize and request all persons to whom this request (original or reproduction) is presented, having information relating to or concerning me, to furnish such information to the Anderson Preparatory Academy Principal Teacher or his or her representatives, and understand and agree that any such information may be disclosed to representatives of the school and Board of Directors. I am aware that this information may be of a personal nature and may otherwise be protected from disclosure by my constitutional, statutory, or common law privileges. Although I understand that the information is intended to remain confidential, I understand that Indiana law may require release of any or all information obtained. I hereby waive all privileges which may attach to such communication or disclosure and release all persons, firms, and corporations, as well as the Board of Directors of the School and employees of the School from all claims resulting from such disclosure.

Signature _____

Social Security Number _____

Date of Birth _____

Position Desired _____