



Tipton-Rosemark Academy

8696 Rosemark Rd. • Millington, TN 38002

(901) 829-6500

Support Staff Application

Required Information

Name _____ Application Date ____ / ____ / ____

Email Address _____ Contact Phone # (____) _____

Street Address _____ City/State _____ Zip _____

Position Desired: _____

Full Time Part Time

Area(s) of Specialty _____

Have you previously applied for a position at Tipton-Rosemark Academy? Yes No

If so, what position? _____

Education • Certification

High School College/University	Dates Attended	Major	Minor	Degree/Diploma <i>Bachelor of Arts/Science/Masters</i>

Other Education and/or Certification related to the job you are applying for: _____

References

Name	Street Address City/State/Zip	Phone	Occupation	Relationship

Personal Background

In the last two years, have you exceeded you allotted number of leave days? Yes No

Personal / Christian Background

Social Security # ____ / ____ / ____ Driver's License # _____ State ____

Have you ever been convicted of a crime? (If yes, attach full details) Yes No

Marital Status Married Single Divorced Separated Widowed

If applicable, spouse's name: _____ Is he/she supportive of your desire to teach in a Christian school? Yes No

If applicable, name and grade level entering of children:

Name _____ Grade ____ Name _____ Grade ____

Will your children attend Tipton-Rosemark Academy? Yes No

Please describe your affiliation, if any, to Tipton-Rosemark Academy (i.e. parent, alumni, etc.). _____

Christian Denomination _____ Church Home _____

Please share your personal testimony. _____

Written Response

Please indicate the reason(s) for your seeking employment at Tipton-Rosemark Academy and detail what would be your strengths as our employee. _____

Written Response

Statement of Agreement

All information and answers to questions herein are complete, true, and correct to the best of my knowledge and belief in consideration of the employment sought. If any misrepresentation by false statement or inaccuracy has been made by me herein, the School may withdraw any offer of employment, or my employment with the School may be terminated immediately without obligation, except for payment of earnings at the rate agreed upon through the last day/hour of my employment.

I hereby authorize the School to conduct a background check and any investigation it deems appropriate and hereby authorize all former employers, educators, and personal references stated on this application to make any and all information available to the School in reference to the application. I further authorize all law enforcement agencies to release the record of all convictions, if any.

I agree to submit myself to a physical examination/drug testing as part of the employment process.

I agree that my employment is contingent upon the satisfactory completion of a 90-day probationary period. I also agree that my employment is subject to and will be governed by all rules, regulations, and Employee Relations Policies as established or amended by the school. I further agree that any employment resulting from this application may be terminated at any time without liability to me for wages or other benefits, except such wages specifically earned at the time and date of such termination.

I have read and understand the foregoing statement of agreement and accept the terms stated herein.

Applicant Signature: _____ **Date:** ____ / ____ / ____