



## Desert Springs Christian Academy Employment Application

Name \_\_\_\_\_  
Last First Middle

Date of Birth (Mo/Day/Year) \_\_\_/\_\_\_/\_\_\_ Social Security # \_\_\_-\_\_\_-\_\_\_

Current Address: \_\_\_\_\_  
Street City State Zip

Home Phone: (\_\_\_\_) \_\_\_\_\_ Mobile Phone: (\_\_\_\_) \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Issuing State \_\_\_\_\_

Email Address: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Name of Spouse \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
Name Phone

Do you attend church regularly? \_\_\_\_\_ If yes, name of church \_\_\_\_\_

If no, please explain \_\_\_\_\_

Have you ever been convicted of a crime?  Yes  No

If yes, please explain \_\_\_\_\_

Have you ever been accused, arrested, or convicted of child abuse, neglect, or a crime involving actual or attempted sexual molestation of a minor or other sexually related crime?  Yes  No

If yes, please explain \_\_\_\_\_

Do you use illegal drugs?  Yes  No

Have you ever been hospitalized or treated for alcohol or substance abuse?  Yes  No

If yes, please explain: \_\_\_\_\_

Are there any circumstances involving your lifestyle or your background that would call into question your ability to work with children?  Yes  No

If yes, please explain \_\_\_\_\_

Please list any other names you have used including maiden name and/or previous married name

\_\_\_\_\_

Place of Birth: City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_

Please list previous addresses within the past five years.

Address: \_\_\_\_\_  
Street City State Zip

Address: \_\_\_\_\_  
Street City State Zip

Address: \_\_\_\_\_  
Street City State Zip

Is there anyone on the faculty or staff of Desert Springs Christian Academy who could provide background information and/or a character reference for you?

Name: \_\_\_\_\_

Name: \_\_\_\_\_

**I verify that the information contained in this application is accurate.**

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION**

I authorize my references, present and past employers, and church listed in this application to give Desert Springs Christian Academy any information, including opinions, they may have regarding my character and fitness for work with children as a teacher, substitute, or school faculty member.

This release and authorization acknowledge that Desert Springs Christian Academy may now, or at any time while I am employed, to obtain and use a background report about me. I understand this report may include, but is not limited to verification of education, previous employment, driving record, and criminal record(s) that may be in the files of federal, state and/or local criminal justice agency in any state.

I authorize a criminal background check organization and any of their agents or designated company personnel or a police department to release to the academy any information that pertains to any record of convictions in its file or in any criminal file maintained on my, whether local, state, or federal, and to disclose orally and/or in writing the results of the background request to designated academy administration.

A photocopy or fax of this Authorization and Consent for Release of Information shall be as valid as the original. The results of the verification process will be used to determine employment eligibility. As a result, all results will be kept CONFIDENTIAL. The information will not be available to any parties other than designated academy administration.

I do hereby agree to forever release and discharge the academy, its associates, faculty, and staff, along with law enforcement agencies and background check organizations, from any claims, damages, losses, liabilities, costs and expenses, or any other charge or complaint arising from the retrieving and reporting of information.

If information from the background check is utilized in part or in whole in making an adverse decision regarding my application, the academy will provide me with a copy of the report.

I hereby authorize **Desert Springs Christian Academy** to obtain background information on me.

Applicant's Typed/Printed Name \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness Signature \_\_\_\_\_ Date \_\_\_\_\_

### **Additional Documents to Be Submitted**

1. One page statement of your relationship with Jesus Christ.
2. Resume of experience.
3. Three Personal/Professional References  
(One can be from a current employee of Desert Springs Christian Academy)
4. FOR FACULTY POSITION:

Transcript(s) from colleges and universities attended OR copies of your diplomas.

### **Instructions for Submission**

1. Only COMPLETE applications will be considered.
2. Mail the completed application to:

**Desert Springs Christian Academy**

**210 S. Nevarez**

**Las Cruces, NM 88001**

**Attn: Headmaster**

or email complete application to: [headmaster@dsclions.org](mailto:headmaster@dsclions.org)

3. You will be notified by e-mail when your application is received.
4. An interview will be scheduled once the application has been reviewed.