



**SOUTH CARIBBEAN CONFERENCE OF S.D.A.
DEPARTMENT OF EDUCATION**



JOB APPLICATION FORM

NAME _____ DATE _____
(Last name) (First name) (Middle name)

MAILING ADDRESS _____ Phone (H/C) _____

WORK ADDRESS _____ Work Phone _____

Date of Birth _____ Birthplace _____ Citizenship _____
(YY/MM/DD)

Health Condition _____ Marital Status _____

Name and ages of children if any _____

Name of Spouse _____ Spouse's occupation _____

Member of the Seventh-day Adventist Church? _____ If so, how long? _____

Name of local church where membership is held _____ National Insurance # _____

E-Mail _____ Teacher Registration # _____

EDUCATIONAL BACKGROUND: List high schools, colleges, universities attended. Include graduate study.

INSTITUTIONS ATTENDED	YEARS	4YEAR GRADUATED	SUBJECTS/ DEGREE ACHIEVED

CERTIFICATION: Special professional certificates currently held, both governmental and denominational

JOB PREFERENCE: List educationally related employment in chronological order. Include practice teaching and/or

POSITION:
WHY:

EXPERIENCE IN EDUCATION: List educationally related employment in chronological order. Include practice teaching and/or administrative experiences.

SCHOOL	NO. OF TEACHERS	WHAT YEAR/S	TEACHER, PRINCIPAL	CLASSES OR SUBJECT	NO. OF PUPILS TAUGHT

ADDITION EXPERIENCE: Note employment and training not reported above that you believe will contribute to your success in the position you are presently seeking.

PROFESSIONAL GROWTH: Indicate professional memberships, publications, and other growth activities in which you have been involved.

VOCATIONAL INTERESTS: Note hobbies and recreational pursuits, particularly those in which you feel competent to share with others.

CHURCH RELATED ACTIVITIES: Indicate all avenues of personal involvement in the mission of the Seventh-day Adventist Church (participating and leadership roles, outreach activities, etc.) Be specific regarding office and/or function.

STATEMENT OF INTENT: Why are you applying for a position in the South Caribbean Conference? Do you believe God “calls” individuals to specific places of service? Please explain your answer.

PHILOSOPHY OF EDUCATION: Provide a short statement of your educational philosophy. How is your philosophy reflected in your teaching/administrative style?

PROFESSIONAL RELATIONSHIPS: As you see it, what is the proper relationship between a principal, a vice principal, and the staff? Between a principal and his superintendent? Between a principal and his board.

VIEW OF ADVENTIST EDUCATION: As you see them what are the strengths and weaknesses of Adventist education? How do you personally relate to these observations?

ADMINISTRATIVE STYLE: Provide one-sentence responses, no more, to the following:

What is the most important function of a school principal, vice principal or teacher? (Choose the view from your prospective position).

What professional task is the least enjoyable to you?

What is the key to good relationships with a school's parent constituency?

How would someone who knows you well describe your temperament?

What personal quality is most likely to spell success for you?

What is your favorite motivational tool?

REFEERENCES: Please refer us to three individuals who can vouch for your professional and character. Do not list relatives. Denominational educators, Pastors, and administrators are preferred.

<u>NAME</u>	<u>OFFICIAL POSITION</u>	<u>ADDRESS</u>	<u>TELEPHONE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

GENERAL STATEMENT: Offer any additional comments which you feel would be of benefit as we evaluate your application.

FOR OFFICIAL USE ONLY

Interviewed by _____ Date: _____

Remarks _____

NOTE TO APPLICATIONS

The South Caribbean Conference operates twenty-one (21) Seventh-day Adventist schools in Trinidad and Tobago. Applicants should be registered as teachers with the Ministry of Education. Three recommendations should be submitted including one from a church pastor or first elder.

Applicants should submit their original certificates and copies to the Department of Education. The original certificates will be certified and returned immediately. Original certificates should not be sent via the mail.

SOUTH CARIBBEAN CONFERENCE OF S.D.A.
DEPARTMENT OF EDUCATION

REFERENCES FORM

PRIVATE AND CONFIDENTIAL

To be completed by the applicant

Name _____

Residential Address _____

Mailing Address _____

Telephone numbers. (home) _____ (mobile) _____ (other) _____

Church Membership _____ Year of Baptism _____

To be completed by the referee

Referee forms must be submitted by the **Pastor, First Elder** and either the **Church Clerk** or **Treasurer** of the congregation in which the applicant holds membership or is currently attending services.

To the referee

The above mentioned individual has applied for a teaching position with the South Caribbean Conference of Seventh-day Adventists. Please complete the section below and either place it in a sealed envelope to the Director of Education or mail it directly to:

The Director of Education
South Caribbean Conference of SDA
P.O.Box 66
Port-of-Spain

How long have you know the applicant? _____

For each item put a (x) in the appropriate column

AREAS	Outstanding	Good	Poor	No Opportunity to Observe
Spiritual Commitment				
Participation in Church Activities				
Team Player				
Christian Values				
Commitment to Adventist Philosophy of Education				
Punctuality				
Financial Management				

In this section, make any comments that you think may be helpful in evaluating the applicant's suitability for teaching in a Seventh-day Adventist school.

RECOMMENDATIONS

Please put a (x) in the column that is most appropriate regarding your overall recommendation concerning the applicant's suitability for employment with this organization.

Highly Recommended	<input type="checkbox"/>	Recommended	<input type="checkbox"/>
Recommended with Reservation	<input type="checkbox"/>	Not Recommended	<input type="checkbox"/>

NAME OF REFEREE

POSITION HELD

SIGNATURE

DATE

SOUTH CARIBBEAN CONFERENCE OF S.D.A.
DEPARTMENT OF EDUCATION

REFERENCES FORM

PRIVATE AND CONFIDENTIAL

To be completed by the applicant

Name _____

Residential Address _____

Mailing Address _____

Telephone numbers (home) _____ (mobile) _____ (other) _____

Church Membership _____ Year of Baptism _____

To be completed by the referee

Referee forms must be submitted by the **Pastor, First Elder** and either the **Church Clerk** or **Treasurer** of the congregation in which the applicant holds membership or is currently attending services.

To the referee

The above mentioned individual has applied for a teaching position with the South Caribbean Conference of Seventh-day Adventists. Please complete the section below and either it in a sealed envelope to the Director of Education or mail it directly to:

The Director of Education
South Caribbean Conference of SDA
P.O.Box 66
Port-of-Spain

How long have you known the applicant?

For each item put a (x) in the appropriate column

AREAS	Outstanding	Good	Poor	No Opportunity to Observe
Spiritual Commitment				
Participation in Church Activities				
Team Player				
Christian Values				
Commitment to Adventist Philosophy of Education				
Punctuality				
Financial Management				

In this section, make any comments that you think may be helpful in evaluating the applicant's suitability for teaching in a Seventh-day Adventist school.

RECOMMENDATIONS

Please put a (x) in the column that is most appropriate regarding your overall recommendation concerning the applicant's suitability for employment with this organization.

Highly Recommended

Recommended

Recommended with Reservation

Not Recommended

NAME OF REFEREE

POSITION HELD

SIGNATURE

DATE

SOUTH CARIBBEAN CONFERENCE OF S.D.A.
DEPARTMENT OF EDUCATION

REFERENCES FORM

PRIVATE AND CONFIDENTIAL

To be completed by the applicant

Name _____

Residential Address _____

Mailing Address _____

Telephone numbers (home) _____ (mobile) _____ (other) _____

Church Membership _____ Year of Baptism _____

To be completed by the referee

Referee forms must be submitted by the **Pastor, First Elder** and either the **Church Clerk** or **Treasurer** of the congregation in which the applicant holds membership or is currently attending services.

To the referee

The above mentioned individual has applied for a teaching position with the South Caribbean Conference of Seventh-day Adventists. Please complete the section below and either it in a sealed envelope to the Director of Education or mail it directly to:

The Director of Education
South Caribbean Conference of SDA
P.O. Box 66
Port-of-Spain

How long have you know the applicant? _____

For each item put a (x) in the appropriate column

AREAS	Outstanding	Good	Poor	No Opportunity to Observe
Spiritual Commitment				
Participation in Church Activities				
Team Player				
Christian Values				
Commitment to Adventist Philosophy of Education				
Punctuality				
Financial Management				

In this section, make any comments that you think may be helpful in evaluating the applicant's suitability for teaching in a Seventh-day Adventist school.

RECOMMENDATIONS

Please put a (x) in the column that is most appropriate regarding your overall recommendation concerning the applicant's suitability for employment with this organization.

Highly Recommended

Recommended

Recommended with Reservation

Not Recommended

NAME OF REFEREE

POSITION HELD

SIGNATURE

DATE

