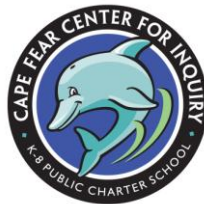


The Cape Fear Center for Inquiry Employment Application



Please submit application to:
Cape Fear Center for Inquiry
2525 Wonder Way
Wilmington, NC 28401
Phone 910-362-0000
Fax 910-362-0048

Name: _____
Last First Middle Maiden

Address: _____
Street City State Zip Code

Home Phone: () _____ Contact Phone: () _____

Email : _____

POSITION APPLYING FOR (Check as many as are appropriate)
_____ Teacher --List grade level(s), subject(s) or Exceptional Children area (Note: Applicant must be certified or certifiable in each area of choice.)
_____ Specialist --List area (Art, Music, etc.) Note: Applicant must be certified or certifiable in each area of choice.
_____ Teacher Assistant
_____ Substitute
_____ Other position--List

Date available for employment: _____

How did you learn about this vacancy: _____

CERTIFICATION

Do you hold a North Carolina teacher license? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, provide a copy with this application) Issue Date: _____ Expiration Date: _____
Have you ever attained tenure in a North Carolina school system? _____ Yes _____ No If yes, please list the district and the year it was attained: _____
Other states in which you hold a valid teaching license/certificate: _____ Expiration Date: _____ (Provide copies with application)
Years of teaching experience: _____

EDUCATION

Level of Education	Name of School or University	Field of Study	Type of Degree (or highest grade completed)	Dates of Attendance (from-to) (month/year -month/year)
High School or GED				
College/University				
College/University				
College/University				

EMPLOYMENT HISTORY

List positions chronologically with the most recent first, account for all periods of unemployment, attach additional sheets if necessary.

Employer	City/State	Dates of Employment	Position	Supervisor's Name and phone number

REFERENCES

You should obtain three written references from persons who have firsthand knowledge of your educational and work background, teaching ability, and other qualifications. You may submit written letters of recommendation from appropriate individuals or letters that are part of your placement office's credential file. Application may be submitted without references but those references should follow by email/mail/fax to the Human Resources Coordinator at the address/fax listed on page 1.

Name of Reference	Position/Relationship	Phone Numbers-work and cell if available
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

BACKGROUND INFORMATION

Please answer the following questions:

Failure to provide accurate and complete information on your application shall be grounds for disqualification for employment or immediate dismissal in the event you are employed.

Please check the appropriate answer:

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been suspended, dismissed, fired, or discharged from a position of employment?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever received a below standard or unsatisfactory rating on an evaluation?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been placed on an action plan (mandatory improvement plan) or been told that you would be required to complete an action plan?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been denied a teaching certificate or had a teaching certificate suspended or revoked?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been asked to resign from a position of employment?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been convicted of any violation of the law other than a minor traffic ticket?
<input type="checkbox"/>	<input type="checkbox"/>	Do you have criminal charges or procedures pending?

If you answer yes to any of the above questions, please explain on a separate page and include with this application. Applications without such explanation will not be considered.

PERSPECTIVE

Please attach your responses to the following questions.

1. Explain why you would like to teach at CFCI. Include your preparation for and/or experience teaching in an inquiry-based format.
2. What other additional information would you like to share about yourself? Please include any additional information regarding your cultural and educational background, career goals, or any recreational activities, travel or experiences with children relative to your employment.

To avoid conflict of interest, list any current CFCI board member or staff member with whom you have any relationship (family, friend, coworker, business, etc.) and cite the relationship.

Name: _____ Relationship: _____
Name: _____ Relationship: _____
Name: _____ Relationship: _____

Persons who are offered employment with Cape Fear Center for Inquiry must meet the following conditions of employment in addition to the conditions of employment in the application:

- Offer of employment with Cape Fear Center for Inquiry is conditional pending approval by the Cape Fear Center for Inquiry Board of Directors and satisfactory completion of the criminal records check.
- Applicants and current employees shall notify the HR Coordinator or Director immediately if they are charged with or convicted of a criminal offense (including entering a plea of guilty or nolo contendere) except minor traffic violations.

Cape Fear Center for Inquiry does not discriminate against any person on the basis of race, sex, color, religion, national origin, citizenship status, age, or handicap in any of its educational or employment programs or activities. We are an "equal opportunity employer."

READ CAREFULLY BEFORE SIGNING:

I certify that all information provided in this application is true and correct to the best of my knowledge. I understand that misrepresentation or failure to fully disclose any information requested in this application shall disqualify me from consideration, or subject me to disciplinary action up to and including dismissal in the event I am employed at the time it is discovered. I agree that if any information or answers to questions change either before or after employment, I will notify Cape Fear Center for Inquiry in writing immediately. I authorize Cape Fear Center for Inquiry to conduct reference and background checks. I have read and understand the conditions of employment stated above.

Signature of Applicant: _____ Date _____

ATTACH A CURRENT RESUME TO THIS APPLICATION