



Seaside Christian Academy Substitute Application

410-213-7595

www.seasidechristianacademy.com

Your interest in Seaside Christian Academy is appreciated. We invite you to fill out this application and return it to the school office. If a need occurs for which you may have an interest, we will notify you and ask you to come in for an interview.

Thank you for interest in the ministry of our school. We are praying that God will send us people who have a heart for Christian education, who really love children, and who, by the pattern of their lives, are Christian role models. Luke 6:40

Application Date: _____

Date Available: _____

NAME AND ADDRESS

Full name: _____ Date of Birth: _____

Present Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Permanent address and phone number if different than present address:

WHAT AREA WOULD YOU LIKE TO HELP?

Please indicate with a check mark the areas of interest:

____ Teacher's Aid ____ Substitute

Full Time: _____

Part Time: _____

Please list any special skills or abilities that you have which would be beneficial:

CHRISTIAN BACKGROUND

Bible Do you believe the Bible to be the ONLY inspired and infallible Word of God, our final authority in all matters of faith, truth, and conduct?

Yes _____ No _____ Signature: _____

Statement
Of Faith

Please carefully read our Statement of Faith, included in this packet, and indicate below your degree of support.

_____ I fully support the Statement of Faith as written without mental reservations.

_____ I support the Statement of Faith except for the area(s) listed and explained on the reverse side. The exceptions represent either disagreements or items for which I have not yet formed an opinion or conviction.

Signature: _____

Church
Service

What is your local church affiliation? _____

Are you presently a member in good standing? _____ Years? _____

In what church activities are you involved?

EDUCATION

Formal
Training

What degrees or degrees do you hold, if any?

Degree	Date Received	Issuing Institution
_____	_____	_____
_____	_____	_____

Your Major(s)

Your Minor(s)

Seaside Christian Academy

Statement of Faith

We Believe:

1. In one God, the creator and sustainer of the universe, eternally existent in three persons: Father, Son and Holy Spirit.
2. God has authored, preserved, and protected the Bible, as is His word and our authority in all that we do.
3. That God has created us in His image and has given us the responsibility over creation for His glory.
4. In the unique deity of the Lord Jesus Christ, who became human as the virgin-born Son of the living God.
5. That the Lord Jesus Christ died to pay for our sins and give those who believe, eternal life with Him in heaven.
6. In the power of the Holy Spirit to restore us and guide us in our relationship with God.
7. In the resurrection of our Lord Jesus from the dead and the promise of His return.
8. In the bodily resurrection and eternal reward of the saved, and the everlasting punishment of the lost.
9. In the spiritual unity of ALL believers in our Lord Jesus Christ.
10. That marriage of one man and one woman is ordained by God.

RECOMMENDATION AND IDENTIFICATION

You will be working with children, therefore we ask that you please submit a copy of your driver's license and a background check with Protect My Ministries. The background check information is available in the school office.

Applicant's Name: _____
(please print)

Applicant's Signature: _____

Date: _____