

LEGACY CLASSICAL ACADEMY SAPIENTAM ET VERITATEM

LCA STAFF Application and Questionaire

PERSONAL AND CONFIDENTIAL

Questionnaire

The following information will be held in strict confidence. Because we are teaching children, we are liable under law to report any suspected child abuse (in compliance with Duty to Report Child Abuse or Neglect, NC General Statute A-543). Please answer all questions honestly.

1. Have you ever had your driver's license suspended or revoked?

2. Have you ever been accused, charged, or convicted of any felony offense or any other crime?

3. Have you ever been accused, charged, or convicted of child abuse, or have you attempted sexual molestation of a minor?

4. Have you consumed illegal drugs or narcotics?

5. Do you regularly abuse alcohol?

6. Have you ever undergone treatment or counseling for alcoholism/substance abuse?

7. Have you ever been convicted of, or pled guilty to, or are charges pending concerning any other crime?

8. Have you ever been the subject of a civil lawsuit (or an investigation or allegation) involving sexual misconduct, sexual harassment, or other immoral behavior or conduct involving adults or children?

9.. Do you have any investigation, review, or disciplinary action pending by an employer, organization in which you volunteer, or professional association for sexual misconduct, violence, or misconduct involving children?

10. Have you ever abused a minor or engaged in conduct including abduction for immoral purposes, sexual assault, failure to secure medical attention for an injured child, pandering, crimes against nature involving children, taking indecent liberties with children, neglect of children, obscenity offenses, or similar moral impropriety involving children? 11. Do you struggle with viewing pornography? _____12. Is there any other information that might be relevant to assessing your fitness for working with children or youth?

13. Have you been in an adulterous relationship? _____
14. Will you grant us permission to perform a criminal history check on you? (A criminal history check is required to work with children at Legacy Classical Academy.) _____

The information contained in this questionnaire is correct to the best of my knowledge. My responses are all true. I understand and agree that any false answers or statements made by me on this form or any supplement thereto, or any false statements made to Legacy Classical Academy during the interview process, will be grounds for not allowing me to serve or for immediate dismissal, no matter when it is discovered. I understand and agree that it is critical to the mission and purpose of Legacy Classical Academy that all staff conform to the highest standards of safety, interpersonal conduct, and sexual morality. I affirm that I will strictly comply with the policies and procedures of Legacy Classical Academy, including those concerning child safety and protection, sexual abuse and misconduct, and interpersonal relationships. I understand and agree that my failure to abide by such policies and procedures may result in immediate dismissal from my position. I hereby release any individual, church, denominational agency or official, reference, or any other person or organization from liability for any damages of whatever kind or nature that may at anytime result to me, my heirs, or family, on account of noncompliance to the policies of Legacy Classical Academy. I understand that a criminal history check might be conducted on me and I consent to any such check. I have carefully read, understand, and agree to the foregoing questionnaire and further understand and agree that a copy of this form shall be as valid as the original.

Application and Questionnaire

Please send completed form to info@legacyclassicalacademy.com for application processing and the background check.

LCA Reference		
Name		
Phone		
Church Reference		
Name of church:		
Name		
Phone		
Character Reference		
Relationship to applicant:		
Name		
Phone		
Applicant		
Full name (last) (first) (middle)		
Date of birth (mm/dd/yyyy)		
Present address		
City, State, Zip code		
Phone number (home) (cell)		
E-mail address		
Marital status If married, please give maiden name		
Previous address		
City State Zip code		
Have you lived in any other states in the past five years?		
If so, please list by date:		

Furthermore, having carefully read the foregoing release, and knowing and understanding the contents thereof, I sign this release of my own free will and act.

Name	Date
Please list a child & age child & age child & age child & age	all of your children and their ages.
child & age	
	h do you attend?

List any physical handicaps or conditions hindering you from performing activities related to teaching youth:

Please share how you became a believing Christian, using at least one Scripture reference, and where your relationship with Jesus Christ is today.

List any gifts, calling, training, education (including medical or emergency), or other factors that have prepared you to work with children.

Essays

Please compose an in-depth paragraph of your reflections on the Dorothy Sayers essay and submit with your application to info@legacyclassicalacademy.com a minimum of three days prior to your interview.