



**KINGDOM**  
CHRISTIAN ACADEMY

*Where Academics & Faith Unite*

**KINGDOM CHRISTIAN ACADEMY**  
OF CALLAWAY COUNTY, MISSOURI  
2051 Silver Drive • P.O. Box 6166 • Fulton, MO 65251  
Phone: 573-642-2117 • Fax Number: 573-642-2022  
Email: office@kcasaints.net • Website: www.kcasaints.org

**SUBSTITUTE APPLICATION FORM**

FULL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Sex: \_\_\_\_\_

Date of Birth: Mo. \_\_\_\_ Day \_\_\_\_ Yr. \_\_\_\_ Place of Birth: \_\_\_\_\_

Maiden Name (if applicable): \_\_\_\_\_

Marital Status:

Married,  Single,  Divorced\*,  Divorced and Remarried\*,  Separated\*

\*If this status is checked, a letter of explanation must accompany this application.

Spouse's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Children:

Name: \_\_\_\_\_ Date of Birth: Mo. \_\_\_\_ Day \_\_\_\_ Yr. \_\_\_\_ Sex: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: Mo. \_\_\_\_ Day \_\_\_\_ Yr. \_\_\_\_ Sex: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: Mo. \_\_\_\_ Day \_\_\_\_ Yr. \_\_\_\_ Sex: \_\_\_\_\_

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

**OFFICE USE ONLY**

Date Request Received: \_\_\_\_\_ Date Application Mailed: \_\_\_\_\_ Date Received: \_\_\_\_\_

Date of Background Check: \_\_\_\_\_ Result of Background Check: \_\_\_\_\_

Date of Interview: \_\_\_\_\_ Interviewer: \_\_\_\_\_ Date of Board Approval: \_\_\_\_\_

1. Name of Church: \_\_\_\_\_

Denomination: \_\_\_\_\_

Pastor's/Minister's Name: \_\_\_\_\_

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

Pastor's Phone # \_\_\_\_\_ Church # \_\_\_\_\_

2. Are you actively involved in a local church? If so, in what aspects are you involved?

3. Please list any other areas of ministry or Christian service in which you have been involved:

4. What books have you read recently that have helped you spiritually?

5. Do you use tobacco, alcohol, or drugs in any form? If yes, explain below:

6. In your own handwriting, please tell us about your walk with Christ, how you came to know the Lord, and how He has led you to where you are today.

7. In your own handwriting, share your philosophy on education of children.

## EDUCATIONAL EXPERIENCE

	Name of School	Address	Dates Attended	Degree
Secondary				
College				
Graduate				

What is/was your major field of study? \_\_\_\_\_

What are/were your minors? \_\_\_\_\_

Certifications held: \_\_\_\_\_

\_\_\_\_\_

Organizations/volunteer work in which you have been involved: \_\_\_\_\_

\_\_\_\_\_

### **Positions Preference:**

*Check option preference(s)*

- Preschool/Early Childhood
- Kindergarten
- Elementary
- Middle School
- Office

## TEACHING OR WORK EXPERIENCE

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Position: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Position: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Position: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

**References:** (If you have had teaching experience, include your last superintendent and principal among your references. If you have had no teaching experience, include references that can attest to your qualifications to fill this position.)

1.  
Name \_\_\_\_\_ Position \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

2.  
Name \_\_\_\_\_ Position \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

3.  
Name \_\_\_\_\_ Position \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

**Christian School Preparation:**

What courses, if any, have you had in Christian Philosophy of Education?

When?

Where?

Have you had other courses giving specific training for Christian schools?

When?

Where?

Name of Course(s)?

Are you familiar with various Christian curriculums (ie., A.C.E., A Beka, Bob Jones, etc.)? If so, which ones?

**Please indicate your degree of support for our Statement of Faith and Lifestyle Statement.**

\_\_\_\_\_ I fully support the KCA Statement of Faith and Lifestyle Statements as written without mental reservations.

Signature: \_\_\_\_\_

\_\_\_\_\_ I support the KCA Statement of Faith and Lifestyle Statements *except for the area(s) listed and explained on a separate page*. The exceptions represent either disagreements or items for which I have not yet formed an opinion or conviction.

Signature: \_\_\_\_\_