

Crieve Hall Church of Christ Prospective Teacher Information Sheet

Name: _____ Age: _____ Today's Date: _____

Address: _____

Phone: _____ Email: _____

When did you place membership at Crieve Hall? _____ (month/year)

Please list your teaching experience and training in church or other settings. Use back if necessary.

Circle all services you currently attend:

Sun. 8:15 a.m. Sun. 10:30 a.m. Bible Study Sunday Night. Wed. 5:15 p.m. or 7:00 p.m.

Please circle ALL age groups you are willing to teach AND the times you would teach:

- | | | | |
|--------------------------|--|--------|-----------|
| • Nursery : | 6 months—24 months | Sunday | Wednesday |
| • Pre-school : | 2 year olds—5 year olds | Sunday | Wednesday |
| • Primary : | Kindergarten—5 th grade | Sunday | Wednesday |
| • Junior High : | 6 th grade—8 th grade | Sunday | Wednesday |
| • Senior High : | 9 th grade—12 th grade | Sunday | Wednesday |
| • College / Young Adults | | Sunday | Wednesday |
| • Adult | | Sunday | Wednesday |

Teaching others is a very serious duty. We desire that our teachers are both well prepared to teach as well as well prepared to lead as an example to others.

Do you smoke, drink, or use recreational drugs? _____

Have you ever been divorced? _____

The elders ask that you use only the King James, New King James, American Standard, New American Standard and English Standard versions of the Bible in teaching a class at Crieve Hall. Please initial, acknowledging this statement. _____

Attached is a form that all teachers are now required to submit giving the elders permission to run a background check. Please initial, signifying you have received the background check form. _____

Thank you for your interest in our education program. Please submit your completed form to Don Henderson or to your supervisor and we will contact you as soon as possible.

Received by supervisor: _____ Received by Don Henderson _____ Submitted to elders: _____

Approvals: _____

12-2015