

## 2023-24 Teacher Application Form

Applicant Information							
Full Name:	Locat	 First		 Middle	Date:		
Address:	Last	Fifst		iviladie			
Addiess.				City	State	ZIP	
Phone:		E	mail				
Date Availa	ble:	Social Security No.:					
Are you auth	horized to work in the	U.S.? YES NO H	Have you e	ver been convicted	l of a felony? YES	NO	
If you have, please explain:							
		Educa	ition				
High Schoo	d:	Address:_					
From:	To:	Did you graduate?	YES NO	Diploma:			
College:		Address:_					
From:	To:	Did you graduate?	YES NO	Degree:			
Other:		Address:_					
From:	To:	Did you graduate?	YES NO	Degree:			
		Classical Educat	ion Knov	<b>/l</b> edge			
On the next	page, please provide	a paragraph detailing yo	ur understa	anding of Classica	Christian education		
		Disclaimer an	d Signati	ıra		_	
Disclaimer and Signature  I certify that my answers are true and complete to the best of my knowledge.							
If this applic	-	ment, I understand that fa	-	_	in my application o	r	
Signature:				Dat	e:		



Classical Education Knowledge