

application for employment - faculty

Personal Information

Name (First, Middle, Last)	Today's Date
Street Address	Phone (home)
City, State, Zip Code	Phone (cell)
Email Address	Phone (work) May we contact you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No

Educational History (Degrees earned or in progress)

Education	Name and address of School(s)	Course of Study	Did you graduate?	Degree or Diploma
High School				
College or University				
Graduate School				
Graduate School				

Church Affiliation

Church Name	Denomination
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Personal Questions

Please answer the following questions on a separate sheet of paper and attach them to this application.

1. Explain from personal experience what it means to be a Christian.
2. Explain from personal experience your practices of nurturing your faith life.
3. Why are you a member of your particular denomination?
4. Are you familiar with and able to subscribe to the Three Forms of Unity (Heidelberg Catechism, Belgic Confession, Canons of Dort) and the Westminster Confession of Faith without reservation because they agree fully with the Scriptures?
5. Do you have any spiritual or emotional struggles which may be a hindrance to effectively performing your duties at Mid-America Reformed Seminary?

View of Seminary Education

Please answer the following questions on a separate sheet of paper and attach them to this application.

1. What is the purpose of seminary education?
2. What should be the relationship between seminary education and the church?
3. How do you define/describe the "call to be a minister of the Word?"
4. Describe how you would seek to promote prophetic zeal and personal godliness among seminary students.
5. Why would you wish to teach at Mid America Reformed Seminary?

Occupational History

Company Name (present or most recent first)	Position/Title
Street Address	Employed from (mo/yr) to (mo/yr)
City, State, Zip Code	Primary Responsibilities
Name of Supervisor	Reason for Leaving (or considering leaving)
Supervisor's contact information	Phone May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Company Name	Position/Title
Street Address	Employed from (mo/yr) to (mo/yr)
City, State, Zip Code	Primary Responsibilities
Name of Supervisor	Reason for Leaving
Supervisor's contact information	Phone

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Name of Supervisor	Reason for Leaving
Supervisor's contact information	Phone

Company Name	Position/Title
Street Address	Employed from (mo/yr) to (mo/yr)
City, State, Zip Code	Primary Responsibilities
Name of Supervisor	Reason for Leaving
Supervisor's contact information	Phone

Use an additional page if more space is needed.

References

Name	Phone
Street Address	Relationship to you
City, State, Zip Code	Number of years this person has known you

Name	Phone
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City, State, Zip Code	Number of years this person has known you

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Street Address	Relationship to you
City, State, Zip Code	Number of years this person has known you

My signature below signifies my knowledge of, and agreement to, the following:

The answers I have given are true and complete and without omission. I understand that any false, misleading, incomplete or misrepresented information of any kind may disqualify me for employment, or if discovered after I am an employee, may result in discipline or termination.

I understand that any offer of employment is conditional upon my ability to submit proof of my legal right to work in the United States.

I authorize Mid-America Reformed Seminary, and its agents, employees, and representatives to obtain any and all information they deem appropriate regarding my employment and job performance from any of the organizations or contacts listed on this application for employment form or any of the organizations' employees, representatives, and agents. This information may be provided either orally or in writing. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against Mid-America Reformed Seminary, its agents, employees, or representatives, or the listed persons or organizations and their agents, employees, and representatives from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me.

Signature	Date
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Please submit this application form along with your current Curriculum Vitae, official undergraduate and graduate transcripts, and the responses to the Personal Questions and View of Seminary Education to:

Dr. Cornelis P. Venema, President
Mid-America Reformed Seminary
229 Seminary Drive
Dyer, IN 46311