



Christian Heritage Classical School  
2715 FM 1844  
Longview, Texas 75604  
903-663-4151 fax 903-663-4587

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## Staff Application for Employment

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

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

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

Daytime Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

If selected, when could you begin employment? \_\_\_\_\_

Position for which you are applying? \_\_\_\_\_

How did you learn of this position? \_\_\_\_\_

Please state specifically why you desire this position:

Name: \_\_\_\_\_

**PROFESSIONAL PREPARATION**

Name and location of high school from which you graduated:

\_\_\_\_\_

Colleges and other further training:

School	Location	Credits or Degrees	Dates

Special Qualifications/Skills Applicable to Position Being Sought:

Honors, Awards, Recognitions Received, Professional Membership:

Name: \_\_\_\_\_

**PROFESSIONAL EXPERIENCE**

Please list all employment in the order of your most recent employment (including military service) whether or not related to the job for which you are applying. Employers will be contacted as references.

Please check with me prior to contacting the following employers \_\_\_1 \_\_\_2 \_\_\_3 \_\_\_4 \_\_\_5

1. Company	From	To	Supervisor
Address, City, State, Zip			Phone
Position Held			
2. Company	From	To	Supervisor
Address, City, State, Zip			Phone
Position Held			
3. Company	From	To	Supervisor
Address, City, State, Zip			Phone
Position Held			
5. Company	From	To	Supervisor
Address, City, State, Zip			Phone
Position Held			

Name: \_\_\_\_\_

**ADDITIONAL REFERENCES**

List below at least three persons (other than relatives) who are familiar with your character, professional qualifications and experience to whom we may direct inquiries.

Name	Address	Daytime Telephone	Relationship

**PERSONAL DATA**

Are you a United States citizen or do you have documents permitting you to work in the United States? \_\_\_\_\_

Have you ever pleaded guilty or been convicted of a crime other than traffic violations? If so, give date, place, and offense. (Nature of crime will be considered in relation to the position for which you are applying.)

Church presently attending: \_\_\_\_\_

Church/Community/Civic Activities:

Name: \_\_\_\_\_

Personal Interests/Hobbies:

Do you have any commitments or responsibilities that would prevent you from being at work regularly?     Yes     No    If yes, please explain.

Christian Heritage Classical School seeks persons who are in agreement with the mission and Christian faith position of the school and have the talents and skills to integrate their professional expertise with their Christian faith.

Briefly describe your personal Christian experience and testimony of God's grace in your life. (If more space is needed, please attach a separate sheet.)

Name: \_\_\_\_\_

In accordance with applicable provisions of federal law, applicants for employment who are in agreement with the Faith statement and the educational mission of Christian Heritage Classical School are considered without discrimination on the basis of race, sex, handicapping condition, or national origin.

I understand that:

1. falsification of information in this application may result in the cancellation and, if employed, may be cause for dismissal;
2. employment is subject to satisfactory reference and employment check made to persons or entities deemed appropriate by the school;
3. should I be employed by the school, I may periodically be asked to reaffirm my position on the Statement of Faith;
4. employment at Christian Heritage Classical School is “at will” unless otherwise defined.

I authorize Christian Heritage Classical School to contact, either written or verbally, any of the work or personal references listed above regarding my character or work performance.

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

Date: \_\_\_\_\_

\*Please enclose an unofficial transcript and a resume with this application.

\*Please be informed that Christian Heritage Classical School conducts a complete background check on all prospective employees.

## MISSION STATEMENT

*The mission of Christian Heritage Classical School, working together with the home, is to provide excellence in classical, Christ-centered education, in order to develop within each student the ability to reason biblically, while encouraging a desire to savor God and to serve both God and man.*

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## STATEMENT OF FAITH

1. We believe the Bible to be the inspired, the only infallible, authoritative, inerrant Word of God (II Timothy 3:16, II Peter 1:21)
2. We believe there is one God, eternally existent in three persons—Father, Son, and Holy Spirit (Genesis 1:1, Matthew 28:19, John 10:30)
3. We believe in the deity of Christ (John 10:33),  
His virgin birth (Isaiah 7:14, Matthew 1:23, Luke 1:35),  
His sinless life (Hebrews 4: 15, 7:26),  
His miracles (John 2:11),  
His vicarious and atoning death (I Corinthians 15:3, Ephesians 1:7, Hebrews 2:9),  
His Resurrection (John 11:25, I Corinthians 15:4),  
His Ascension to the right hand of God (Mark 16:19),  
His personal return in power and glory (Acts 1:11, Revelation 19:11)
4. We believe in the absolute necessity of regeneration by the Holy Spirit for salvation because of the exceeding sinfulness of human nature and that men are justified on the single ground of faith in the shed blood of Christ and that only by God's grace and through faith alone are we saved (John 3:16–19, 5:24; Romans 3:23, 5:8–9; Ephesians 2:8–10; Titus 3:5)
5. We believe in the resurrection of both the saved and the lost; they that are saved unto the resurrection of life, and they that are lost unto the resurrection of condemnation (John 5:28–29)
6. We believe in the spiritual unity of believers in our Lord Jesus Christ (Romans 8:9, I Corinthians 2:12–13, Galatians 3:26–28)
7. We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life (Romans 8:13–14; I Corinthians 3:16, 6:19–20; Ephesians 4:30, 5:18)
8. We believe that God wonderfully and immutable creates each person as male or female. These two distinct, complementary genders together reflect the image and nature of God. (Gen. 1:26-27) Rejection of one's biological sex is a rejection of the image of God within that person.

9. We believe that the term “marriage” has only one meaning: the uniting of one man and one woman in a single, exclusive union, as delineated in scripture. (Gen. 2:18-25) We believe that God intends sexual intimacy to occur only between a man and a woman who are married to each other. (1 Cor. 6:18; 7:2-5; Heb. 13:4) We believe that God has commanded that no intimate sexual activity be engaged in outside of marriage between a man and a woman.
10. We believe that any form of sexual immorality is sinful and offensive to God. (Matt 15:18-20; 1 Cor. 6:9-10)
11. We believe that in order to preserve the function and integrity of Christian Heritage Classical School as a Body of Christ, and to provide a biblical role model to the school and community, it is imperative that all persons employed by Christian Heritage Classical School in any capacity, or who serve as volunteers, agree to and abide by this position statement on marriage, gender and sexuality. (Matt. 5:16; Phil. 2:14-16; 1 Thess. 5:22)
12. We believe that God offers redemption and restoration to all who confess and forsake their sin, seeking His mercy and forgiveness through Jesus Christ. (Acts 3:19-21; Rom. 10:9-10; 1 Cor. 6:9-11)
13. We believe that every person must be afforded compassion, love, kindness, respect, and dignity. (Mark 12:28-31; Luke 6:31). Hateful and harassing behavior or attitudes directed toward any individual are to be repudiated and are not in accord with scripture nor the doctrines of Christian Heritage Classical School.

The statement of faith does not exhaust the extent of our beliefs. The Bible itself, as the inspired and infallible Word of God that speaks with final authority concerning truth, morality, and the proper conduct of mankind, is the sole and final source of all that we believe. For purposes of Christian Heritage Classical School’s faith, doctrine, practice, policy, and discipline, our CHS Administration, Chaplain, and Board of Trustees is the school’s final interpretive authority on the Bible’s meaning and application.

We who serve the Lord at Christian Heritage Classical School are committed to this Statement of Faith by which we live, by accepting the government of God through Christ in our ministry of teaching and learning.

I am in agreement with and committed to this Statement of Faith.

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

Date: \_\_\_\_\_



## CHRISTIAN HERITAGE CLASSICAL SCHOOL

### AUTHORIZATION FOR CRIMINAL HISTORY CHECK

I, \_\_\_\_\_, hereby authorize Christian Heritage Classical School or its designee to perform a criminal history check from appropriate sources. Such sources may include national database services, State of Texas databases and/or local court records. Information obtained from any source will remain confidential but will be used for employment evaluation purposes by Christian Heritage Classical School.

I have read the above authorization and understand what it means. By my signature below, I hereby authorize Christian Heritage Classical School to perform a criminal history search.

First Name                      Middle Name                      Maiden Name                      Last Name

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Address (if different)                      City, State                      ZIP

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Signature

---

Social Security Number

---

Date of Birth

---

Date

Office Use Only:

Database Service

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State of Texas-DPS/or Other State Records

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Gregg County Records/or Other County Records

# Form W-4 (2017)

**Purpose.** Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

**Exemption from withholding.** If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2017 expires February 15, 2018. See Pub. 505, Tax Withholding and Estimated Tax.

**Note:** If another person can claim you as a dependent on his or her tax return, you can't claim exemption from withholding if your total income exceeds \$1,050 and includes more than \$350 of unearned income (for example, interest and dividends).

**Exceptions.** An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- Is blind, or
- Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return,

The exceptions don't apply to supplemental wages greater than \$1,000,000.

**Basic instructions.** If you aren't exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

**Complete all worksheets that apply.** However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

**Head of household.** Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See

Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

**Tax credits.** You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the Personal Allowances Worksheet below. See Pub. 505 for information on converting your other credits into withholding allowances.

**Nonwage income.** If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

**Two earners or multiple jobs.** If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

**Nonresident alien.** If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

**Check your withholding.** After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2017. See Pub. 05, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

**Future developments.** Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at [www.irs.gov/w4](http://www.irs.gov/w4).

## Personal Allowances Worksheet (Keep for your records.)

- A Enter "1" for yourself if no one else can claim you as a dependent . A  
 • You're single and have only one job; or
- B Enter "1" if: B  
 • You're married, have only one job, and your spouse doesn't work; or  
 • Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less.
- C Enter "1" for your spouse. But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.) C
- D Enter number of dependents (other than your spouse or yourself) you will claim on your tax return . D
- E Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above) E
- F Enter "1" if you have at least \$2,000 of child or dependent care expenses for which you plan to claim a credit F  
 (Note: Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.)
- G Child Tax Credit (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information. G  
 • If your total income will be less than \$70,000 (\$100,000 if married), enter "2" for each eligible child; then less "1" if you have two to four eligible children or less "2" if you have five or more eligible children.  
 • If your total income will be between \$70,000 and \$84,000 (\$100,000 and \$119,000 if married), enter "1" for each eligible child.
- H Add lines A through G and enter total here. (Note: This may be different from the number of exemptions you claim on your tax return.) H

For accuracy, complete all worksheets that apply.

- If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the Deductions and Adjustments Worksheet on page 2.
- If you are single and have more than one job or are married and you and your spouse both work and the combined earnings from all jobs exceed \$50,000 (\$20,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to avoid having too little tax withheld.
- If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form W-4 below.

Separate here and give Form W-4 to your employer. Keep the top part for your records. -----

<b>Form W-4</b> Department of the Treasury Internal Revenue Service	<h2 style="margin: 0;">Employee's Withholding Allowance Certificate</h2> <p style="font-size: small; margin: 0;">Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS,</p>	OMB No. 1545-0074 <h1 style="margin: 0;">2017</h1>
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Your first name and middle initial	Last name	2 Your social security number
Home address (number and street or rural route)		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. <small>Note: If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.</small>
City or town, state, and ZIP code		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. <input type="checkbox"/>
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)		5
6 Additional amount, if any, you want withheld from each paycheck		6 \$

7 I  **Exempt** claim exemption from withholding for 2017, and I certify that I meet both of the following conditions for exemption.

- Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and
  - This year I expect a refund of all federal income tax withheld because I expect to have no tax liability.
- I meet both conditions, write "Exempt" here .**

Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.

Employee's signature

**Deductions and Adjustments Worksheet**

Note: Use this worksheet *only* if you plan to itemize deductions or claim certain credits or adjustments to income.

- 1 Enter an estimate of your 2017 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 10% of your income, and miscellaneous deductions. For 2017, you may have to reduce your itemized deductions if your income is over \$313,800 and you're married filing jointly or you're a qualifying widow(er); \$287,650 if you're head of household; \$261,500 if you're single, not head of household and not a qualifying widow(er); or \$156,900 if you're married filing separately. See Pub. 505 for details . 1 \$
- 2 Enter: { \$9,350 if head of household }  
 { \$6,350 if single or married filing separately } 2 \$
- 3 Subtract line 2 from line 1. If zero or less, enter "-0-" 3 \$
- 4 Enter an estimate of your 2017 adjustments to income and any additional standard deduction (see Pub. 505) 4 \$
- 5 Add lines 3 and 4 and enter the total. (Include any amount for credits from the *Converting Credits to Withholding Allowances for 2017 Form W-4* worksheet in Pub. 505.) 5 \$
- 6 Enter an estimate of your 2017 nonwage income (such as dividends *or* interest) 6 \$
- 7 Subtract line 6 from line 5. If zero or less, enter "-0-" 7 \$
- 8 Divide the amount on line 7 by \$4,050 and enter the result here. Drop any fraction 8
- 9 Enter the number from the Personal Allowances Worksheet, line H, page 1 9
- 10 Add lines 8 and 9 and enter the total here. If you plan to use the Two-Earners/Multiple Jobs Worksheet, also enter this total on line 1 below. Otherwise, stop here and enter this total on Form W-4, line 5, page 1 10

**Two-Earners/Multiple Jobs Worksheet** !See *Two earners or multiple jobs on page 1,*)

Note: Use this worksheet *only* if the instructions under line H on page 1 direct you here.

- 1 Enter the number from line H, page 1 (or from line 10 above if you used the Deductions and Adjustments Worksheet) 1
- 2 Find the number in Table 1 below that applies to the LOWEST paying job and enter it here. However, if you are married filing jointly and wages from the highest paying job are \$65,000 or less, do not enter more than "3" 2
- 3 If line 1 is more than or equal to line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4, line 5, page 1. Do not use the rest of this worksheet . 3

Note: If line 1 is less than line 2, enter "-0-" on Form W-4, line 5, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.

- 4 Enter the number from line 2 of this worksheet 4
- 5 Enter the number from line 1 of this worksheet 5
- 6 Subtract line 5 from line 4 . 6
- 7 Find the amount in Table 2 below that applies to the HIGHEST paying job and enter it here 7 \$
- 8 Multiply line 7 by line 6 and enter the result here. This is the additional annual withholding needed 8 \$
- 9 Divide line 8 by the number of pay periods remaining in 2017. For example, divide by 25 if you are paid every two weeks and you complete this form on a date in January when there are 25 pay periods remaining in 2017. Enter the result here and on Form W-4, line 6, page 1. This is the additional amount to be withheld from each paycheck 9 \$

Table 1				Table 2			
Married Filing Jointly		All Others		Married Filing Jointly		All Others	
If wages from LOWEST paying job are-	Enter on line 2 above	If wages from LOWEST paying job are-	Enter on line 2 above	If wages from HIGHEST paying job are-	Enter on line 7 above	If wages from HIGHEST paying Job are-	Enter on line 7 above
\$0 - \$7,000	0	\$0 - \$8,000	0	\$0 - \$75,000	\$610	\$0 - \$38,000	\$610
7,001 - 14,000	1	8,001 - 16,000	1	75,001 - 135,000	1,010	38,001 - 85,000	1,010
14,001 - 22,000	2	16,001 - 26,000	2	135,001 - 205,000	1,130	85,001 - 185,000	1,130
22,001 - 27,000	3	26,001 - 34,000	3	205,001 - 360,000	1,340	185,001 - 400,000	1,340
27,001 - 35,000	4	34,001 - 44,000	4	360,001 - 405,000	1,420	400,001 and over	1,600
35,001 - 44,000	5	44,001 - 70,000	5	405,001 and over	1,600		
44,001 - 55,000	6	70,001 - 85,000	6				
55,001 - 65,000	7	85,001 - 110,000	7				
65,001 - 75,000	8	110,001 - 125,000	8				
75,001 - 80,000	9	125,001 - 140,000	9				
80,001 - 95,000	10	140,001 and over	10				
95,001 - 115,000	11						
115,001 - 130,000	12						
130,001 - 140,000	13						
140,001 - 150,000	14						
150,001 and over	15						

7 | Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(Q)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

