



SHARE LEAD TEACHER APPLICATION

Thank you for your application to fill this position at the
South Texas Pregnancy Care Center!

We deeply appreciate your interest in serving in this position. The Sexual Health And Relationship Education (SHARE) program is an integral part of the ministry of the South Texas Pregnancy Care Center. Your participation in this application and screening process helps us get to know you better; be good stewards of your investment of time, energy, and resources; and ensure the integrity of our program. Thank you.

Date:		
Demographics and Contact Information		
Name:		
Address:	City:	Zip:
Phone:		
Email:		

Have you or a close family member experienced any of the following:	Self	Family
Teen Pregnancy		
Adoption		
Abortion		

Educational History			
	Name of School	Years Attended	Degree Earned
High School			
Trade School			
College			
Graduate School			

Applicant's Employment History					
Date	Employer	Position	Contact Person	Phone Number	May we Contact?

Personal References (Please list at least 3 that may be contacted)			
Name	Relationship	Phone Number	May we Contact

Please tell us more about you

Is there a specific reason you are interested in seeking this position as the SHARE Lead Teacher?

Please list some of the qualities, skills, or other attributes you feel you possess that make you a good candidate for this position?

STPCC is a pro-life Christian ministry. We believe that our faith in Jesus Christ empowers us, enables us, and motivates us to provide service to our communities. We also believe that education is essential to help young people make healthy choices regarding sex. Please write a brief statement about how your faith would affect your work if hired for this position.

Have you ever been arrested or convicted of a crime? If yes, please explain.

Please carefully read and initial the following statements.

Initial	Statement
	I agree to follow all program guidelines and understand that any violation could result in suspension and/or termination of my participation in the program.
	I understand STPCC will conduct a background check regarding my driving record, criminal history, employment history, and personal and professional references.
	I authorize STPCC permission to obtain any needed information regarding my driving record, legal/criminal history, character references, and employment from any state or federal agency, my employer, and personal references for the purposes of participating in a volunteer program.

Please attach the following items to this application:

- Copy or scan of a valid ID
- Completed Information Release Form
- Signed Guiding Principles Form

Please sign and date below indicating that you have read and understand this application and the requested attachments and attest that the information provided is to the best of your knowledge accurate and true.

Signature

Date

Updated October 2018