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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Personal Information |  |  |  |  |  |  | | --- | | Social Security Number: | | Date of Birth: |  |  |  | | --- | --- | | Do you agree with the TANAS Statement of Faith? | Years of Experience as a Teacher: Administrator: |  |  | | --- | | Have you completed a course on the Christian Philosophy of Education? | | Have you received any awards or recognitions as an educator? | | Have you completed a background check? | | Have you ever been convicted of a crime? Have you ever been arrested? | | Have you ever had a license revoked, suspended or denied? |   If you answered, “yes” to questions regarding conviction, arrest or licensure issues, please attach details with this application. |

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Employer Information |  |  |  |  |  |  | | --- | | Name of School | | Address |  |  |  | | --- | --- | | Phone | Email | | School Website | Student Enrollment |   Immediate Supervisor or School Board Chairperson |

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Education |  |  |  |  |  |  | | --- | | Degrees Earned Name of College/University |  |  |  | | --- | --- | |  |  | |  |  | |  |  | |  |  |   **Please attach your transcripts with this application.** |

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Licenses |  |  |  |  |  |  | | --- | | Please list any previous or current licenses. |  |  |  | | --- | --- | | Issuer of License | Expiration Date | |  |  | |  |  | |  |  |   **Please attach a copy of any current licenses.** |

**TYPES OF ADMINISTRATOR LICENSES**

Please check the license for which you are applying.

Type Check Items to Include

|  |  |  |
| --- | --- | --- |
| Administrative Assistant License |  | College/University Transcripts  Praxis Exams  Previous or current licenses |
| Administrator License |  | College/University Transcripts  Praxis Exams  Previous or current licenses |

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**Verification of Employment**

|  |  |
| --- | --- |
| Name of Supervisor or School Board Chairperson |  |
| How long has the applicant been employed? |  |
| Is the applicant full time or part-time? |  |
| This person will administer what grades? |  |

My signature certifies that the applicant is an adult, possesses Christ-like character, is in good standing with the school and is recommended by me for licensure with TANAS.

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Signature

Please mail the application, along with supporting documents and the application fee of $35.00 to:

TANAS

PO Box 411

Hohenwald, TN 38462

TANAS Statement of Faith may be located on the website: tanasonline.org