

**CALVARY BIBLE COLLEGE**  
**Springside Road, Jingkieng, Nongthymmai,**  
**Shillong – 793014, Meghalaya**

*For any query, please contact: -*  
*Principal - 98623 11575.*  
*Registrar - 9774511355.*

Date of Received (for office use only): \_\_\_\_\_

**APPLICATION FORM FOR THE POST OF LECTURER**

**Name of Position** : **Lecturer**

**Personal Information**

Full Name (Capital) : \_\_\_\_\_

Date of Birth : \_\_\_\_\_

Father's name : \_\_\_\_\_

Phone No. : \_\_\_\_\_

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

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

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Marital Status : \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Spouse's Occupation : \_\_\_\_\_

No. of Children: \_\_\_\_\_

**Secular Education Profile**

**High School Name:** \_\_\_\_\_

Year of Completion (X): \_\_\_\_\_

Result : \_\_\_\_\_

**Higher Secondary School:** \_\_\_\_\_

Year of Completion (XII): \_\_\_\_\_

Result : \_\_\_\_\_

**College Name:** \_\_\_\_\_

Years Attended: \_\_\_\_\_

Year of Graduation: \_\_\_\_\_

Major (if any) : \_\_\_\_\_

Result : \_\_\_\_\_

**University Name:** \_\_\_\_\_

Years Attended: \_\_\_\_\_

Year of Graduation: \_\_\_\_\_

Major (if any) : \_\_\_\_\_

Result : \_\_\_\_\_

**Theological Education Profile**

***Bachelor Degree***

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

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

Years Attended: \_\_\_\_\_

Year of Completion: \_\_\_\_\_

Name of the Degree: \_\_\_\_\_

Result : \_\_\_\_\_

***Master Degree***

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

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

Years Attended: \_\_\_\_\_

Year of Completion: \_\_\_\_\_

Name of the Degree: \_\_\_\_\_

Result : \_\_\_\_\_

**Teaching Experience**

***Secular Institution***

Name of the Institution: \_\_\_\_\_

Years of Teaching : \_\_\_\_\_

Contract/ Regularized : \_\_\_\_\_

Subject/Paper : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Theological Institution***

Name of the Institution: \_\_\_\_\_

Years of Teaching : \_\_\_\_\_

Contract/ Regularized : \_\_\_\_\_

Subject/Paper : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Ministerial License**

Local License : (Obtained/Not Obtained) \_\_\_\_\_

Issued By : \_\_\_\_\_

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

Certificate No. : \_\_\_\_\_

General License : (Obtained/Not Obtained) \_\_\_\_\_

Issued By : \_\_\_\_\_

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

Certificate No. : \_\_\_\_\_

**Ministerial Experience**

*Name of Post/Works*

Previous Post/Works: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Present Post/Works: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Years of Service* : \_\_\_\_\_  
\_\_\_\_\_

*Employed By* : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**New Birth Experience**

***Water Baptism***

Date of Experience : \_\_\_\_\_

Place : \_\_\_\_\_

Minister : \_\_\_\_\_

***Baptism of the Holy Spirit***

Date of Experience : \_\_\_\_\_

Place : \_\_\_\_\_

Occasion : \_\_\_\_\_

**Holiness Experience**

Previous Practice of Smoking, Chewing of Tobacco or other Intoxicated: (Yes/No) \_\_\_\_\_

***If yes, please fill up the followings: -***

Name(s) of the Practice : \_\_\_\_\_

Year of Giving-up : \_\_\_\_\_

Reasons for Giving-up : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**AGREEMENT (Read carefully before signing or submitting the form)**

- I acknowledge that individuals who provide false, inaccurate, or incomplete information in the application form, in an interview, or any other part of the hiring process or who fail to disclose information requested in the application form, in an interview, or any other part of the hiring process will not be eligible for employment, or, if they are hired, they will be subject to termination.
- I authorize all current and former employers, teachers, and references to release all information regarding my professional competence, performance, character, and background. I waive any right I may have against any person contacted as a reference concerning this application.
- I understand that this application will be considered active for three (3) months from the date filed. I further understand that if I am employed by the Calvary Bible College through the Theological Education Board of UPC-NEI, this application and associated documents will become part of my permanent record.
- I understand that this application is not a contract of employment. In accepting the position, if hired, I understand that employment is at will, unless otherwise specified by the Rules and Regulation of the College. I acknowledge that the authority may discharge an at-will employee at any time for any legal reason or any disciplinary action(s) against me.
- I attest that all the information contained in this application is accurate, complete, and true.
- I am bound by all elements of the agreement section of the application.
- I understand and accept that late submission of my application will be considered equivalent to the termination of my application.

**Date:** \_\_\_\_\_ **Applicant's Signature:** \_\_\_\_\_

**Note:** The Calvary Bible College through the Theological Education Board of UPC-NEI will select for employment qualified applicants for the position without improper discrimination on the basis of race, color, creed, gender identity, national origin, ethnic background, age, or disability. Persons with disabilities who can perform the essential functions of an assignment with or without reasonable accommodation shall be considered qualified applicants. The College and the TEB shall take affirmative action in the recruitment, appointment, assignment and advancement of personnel to accomplish the goals of equal employment opportunity.

***Documents to be attached (photo copies):***

1. Matriculation Certificate & Marksheet
2. Higher Secondary Certificate & Marksheet
3. Bachelor Degree Certificate & Marksheet
4. All the Theological Education Degree Certificate & Marksheet
5. All the Ministerial License (Certificate)
6. Local Church Recommendation
7. Sectional Pastor Recommendation
8. District Recommendation (District Superintendent).