**APPLICATION**

**Director of Wisdom’s Way Interfaith School**

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| --- | --- | --- |
| **Name:** | | **Date:** |
| **Address:** | | |
| **City**: | **State & Zip Code**: | |
| **Phone:** | **Email:** | |

**Previous Employment (most recent first):**

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| --- | --- | --- | --- |
| **Employer Name** | **Dates from / to** | **Position held** | **Reason for leaving** |
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**Current Qualifications (as it relates to job description):**

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| --- | --- | --- |
| **Qualification** | **Degrees – Training – Workshop**  **Interfaith Experiences** | **Dates** |
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**Please answer the following questions:**

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| --- | --- |
| 1. **Why do you desire to be the Director of Wisdom’s Way Interfaith School?** |  |
| **2) What Interfaith experiences have been most meaningful in your life?** |  |
| **3) What experiences working with and teaching adults have been most meaningful in your life?** |  |
| **4) What meaning has spiritual direction had in your life?** |  |

**Please provide contact information for three people who can speak on your behalf as a personal and/or professional reference.**

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| --- | --- | --- |
| **Name** | **Phone Number** | **Relationship** |
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**Deadline for applications is February 16, 2024**