GENERAL APPLICATION FOR EMPLOYMENT

Church Name:

Address:	
Phone:	

PERSONAL INFORMATION									
Last Name			First	First			M.I.	Date	
Street Address				1			Apartment/Unit #		
City			State				ZIP		
Phone			E-mail	Address					
Date Available	ble Social Secu			urity No. Des			sired Salary		
Position Applied for									
Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO I									
Are you 18 years or older? YES NO									
Have you ever been convicted of a felony? YES NO									
May we contact you for another position? YES NO									
EMPLOYMENT INFO	RMATION								
Position Applying For:				Date You Can Start:			tart:		
Salary Listed: Salary Desired:									
Are you employed now	? YES 🗌 NO 🗌	Ifs	o, may we	e inquire of y	our present em	ploy	er? YES		
Have you previously a	plied to		ch	urch? YES	5 🗌 NO 🗌	If	so, when?		
Do you desire 🗌 Ful	-Time Or 🗌 Part-Tim	e Work? Da	ays and Ho	ours Availab	le:				
EDUCATION AND	TRAINING								
High School			Address						
From To	Did you graduat	e?	YES NO Degree						
College			Address						
From To	o Did you graduate?		YES NO Degree						
Other A				Address					
From To	Did you graduat	Did you graduate? YE			YES D NO Degree				
List any other relevant training, certifications or coursework (include missions):									
List computer languages, or software you are familiar with:									

Skills:						
MINISTRY EXPERIENCE						
Please indicate any ministry experience (Indicate Role, Dates of Service and Locations Served):						
JOB DESCRIPTION (IF ATTACHED TO APPLICATION)						
Do you have the ability to perform the job functions listed in the job description? YES NO						
Are you able to perform these tasks with our without any accommodation? WITH WITHOUT						
REFERENCES						
Please list three professional references.						
Full Name Relationship	Relationship					
Company Phone ()	Phone ()					
Address						
Full Name Relationship	Relationship					
Company Phone ()	Phone ()					
Address						
Full Name Relationship	Relationship					
Company Phone ()						
Address						
PREVIOUS EMPLOYMENT						
Employer Phone ()	Phone ()					
Address Supervisor	Supervisor					
Job Title Starting Salary \$ Ending Salary \$						
Responsibilities						
From To Reason for Leaving						
May we contact your previous supervisor for a reference? YES NO	NO 🗌					
Employer Phone ()						
Address Supervisor	Supervisor					

Job Title			Starting Salary	\$	Ending Salary	\$		
Responsibilities								
From	То	Reason for Leaving						
May we contact your previous supervisor for a reference? YES Solution NO Solution								
Employer				Phone ()				
Address				Supervisor				
Job Title			Starting Salary	\$	Ending Salary	\$		
Responsibilities								
From	То	Reason for Leaving						
May we contact your previous supervisor for a reference? YES NO								

DISCLAIMER I have read and subscribe without reservation to ______ Church Statement of Faith? YES ____ NO ___ Church Presently Attending: City: Pastor: What is your present level of church involvement?

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you and all information concerning my previous employment and any pertinent information they may have personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, I am subject to the policies contained in ______ Church's Handbook and a 90 day observation period. I further understand that this application is not a contract of employment, nor a legal document, and nothing contained herein creates a contract between ______ Church and me.

I consent to ______ Church conducting a criminal records check, asl long as the results are kept confidential. I authorize the appropriate law enforcement agency to release information pertaining to any record or file maintained on me and release said agency from any and all liability resulting from such disclosure.

Signature

Date