(CHURCH NAME) EMPLOYMENT APPLICATION

This type of application should be completed by all who seek any position at the Church. Those volunteering to work with youth should fill out the “Youth Worker/Misconduct Coverage Application”. You should tailor the application to the specific circumstances in your congregation. However, the employment application should include sections for personal identification, job qualifications, experience, and background for the past 5-10 years, references, a criminal history, and a waiver/consent to periodic criminal records check or fingerprinting.)

**APPLICANT INFORMATION**

|  |
| --- |
| Name (Last) (First) (Middle) Date |
| Address City State ZIP Code |
| Telephone Alternate Telephone Best Contact Time E-Mail Address |
| Driver's License No./Issuing State |
| Position Apply For Type of Work DesiredFull-Time Part-Time Temporary/Contract |
| When Are You Available to Begin Work? Will You Work Overtime?Yes No |
| If hired, can you provide evidence that you are authorized **and** of legal age to work in the United States?Yes No |
| In Case of Emergency Notify Telephone | Name of Nearest Relative Telephone |

**EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***TYPE*** | ***SCHOOL NAME/LOCATION*** | ***COURSE OF STUDY*** | ***NO. YEARS ATTENDED*** | ***DEGREE/DIPLOMA*** |
| HIGH SCHOOL |  |  |  |  |
| BUSINESS/TECHNICAL |  |  |  |  |
| COLLEGE |  |  |  |  |
| GRADUATE |  |  |  |  |
| OTHER |  |  |  |  |

|  |
| --- |
| Professional Organizations: |
| First-Aid Training? Date CompletedYes No |
| CPR Training? Date CompletedYes No |

**EMPLOYERS (CURRENT AND PREVIOUS)**

*(List all jobs and contracts held by you during the past five continuous years)*

**CURRENT EMPLOYER**

|  |
| --- |
| Company Name Telephone |
| Address City State ZIP Code |
| Position Held From To Starting/Ending Salary |
| Reason for Leaving Supervisor |

**PREVIOUS EMPLOYER**

|  |
| --- |
| Company Name Telephone |
| Address City State ZIP Code |
| Position Held From To Starting/Ending Salary |
| Reason for Leaving Supervisor |

**PREVIOUS EMPLOYER**

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|  |
| --- |
| Company Name Telephone |
| Address City State ZIP Code |
| Position Held From To Starting/Ending Salary |
| Reason for Leaving Supervisor |

**MILITARY STATUS**

|  |
| --- |
| Have You Served in the U.S. Armed Services? Branch Start Date End DateYes No |
| Rank/Rate at Discharge Type of Service Type of Discharge |
| Special Training/Experience Received in the U.S. Armed Services Draft Status Reserve Status |

**CRIMINAL HISTORY**

|  |
| --- |
| Have you ever been *convicted* of a criminal offense? Check One: Yes No |
| Do you currently have any criminal actions pending in which you are the Defendant? Check One: Yes No |
| Are you currently on probation or parole? Check One: Yes No |
| If you answered "Yes" to any of the above questions, please explain the nature of the offense and provide the date of the offense and the county and state in which it occurred. |

**PERSONAL REFERENCES:**

|  |
| --- |
| Name Address Phone Occupation Relationship |
| Name Address Phone Occupation Relationship |
| Name Address Phone Occupation Relationship |

**APPLICANT STATEMENT**

(Read and Sign Below)

*I recognize that CHURCH NAME is relying on the accuracy of the information I provided on Employment Application form. Accordingly, I attest and affirm that the information I have provided is true and correct.*

*I authorize the organization to contact any person or entity listed on this Employment Application form, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications.*

*I voluntarily release the organization and any such person or entity listed on the Employment Application form from liability involving the communication or information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation if such a check is deemed necessary.*

*I have carefully read the policy and procedures of the organization, and I agree to abide by those policies and procedures.*

|  |
| --- |
| Print Name |
| Signature Date |

Last Updated February 15th, 2022