



## Application for Employment

Name (Last, First): \_\_\_\_\_ Social Security # \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ E-mail: \_\_\_\_\_

### Education:

High School: \_\_\_\_\_ City/State: \_\_\_\_\_ Graduated?  Yes  No

College: \_\_\_\_\_ City/State: \_\_\_\_\_ Graduated?  Yes  No

Degree(s) Earned/Year: \_\_\_\_\_

College: \_\_\_\_\_ City/State: \_\_\_\_\_ Graduated?  Yes  No

Degree(s) Earned/Year: \_\_\_\_\_

Additional Job Related Training, Education, or Trade or Business Certifications: \_\_\_\_\_

### Employment: (Please provide employment information for the past five (5) years)

Name of Current or Last Employer: \_\_\_\_\_

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

Job Title/Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_ May we contact?  Yes  No

Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name of Current or Last Employer: \_\_\_\_\_

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

Job Title/Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_ May we contact?  Yes  No

Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**Knowledge/Skills/Abilities:** (Please list your areas of highest proficiency, any special skills or other information relevant to the position you seek, including telephone and/or computer skills, knowledge of computer software programs, etc.): \_\_\_\_\_

**Background Information:**

- ♦ Have you ever been convicted of a felony or first degree misdemeanor? Yes No
- ♦ Have you ever pled nolo contendere or pled guilty to a crime which is a felony or first degree misdemeanor? Yes No
- ♦ Have you ever had the adjudication of guilt withheld for a crime which is a felony or first degree misdemeanor? Yes No
- ♦ If you answered yes to any of the above questions, please explain. \_\_\_\_\_

- ♦ Are you a U.S. citizen or are you legally authorized to work in the U.S.? Yes No

**Personal Information:**

- ♦ Birthdate: \_\_\_\_\_ ♦ Marital Status:  Married  Single  Divorced  Widowed
- ♦ Do you attend church regularly? Yes No ♦ Are you a member? Yes No
- ♦ Name of Church: \_\_\_\_\_ City: \_\_\_\_\_  
 Pastor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 May we call for a reference? Yes No How long have you attended? \_\_\_\_\_  
 Areas of Service: \_\_\_\_\_ Spiritual Gifts \_\_\_\_\_
- ♦ When did you become a Christian? \_\_\_\_\_
- ♦ How do you feel about sharing your faith in Christ? \_\_\_\_\_  
 Have you had training to share your faith? Yes No
- ♦ Do you believe in the sanctity of life from conception to eternity? Yes No
- ♦ Do you believe we are to provide alternatives to abortion? Yes No

Please provide two personal references:

Name	Street Address	City/State	Phone and E-mail

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I certify that I have read and completed the above application and that all information provided by me on this application is true and complete.

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

**Employment Information (continued):**

Name of Current or Last Employer: \_\_\_\_\_

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

Job Title/Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone \_\_\_\_\_ May we contact?  Yes  No

Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name of Current or Last Employer: \_\_\_\_\_

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

Job Title/Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone \_\_\_\_\_ May we contact?  Yes  No

Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name of Current or Last Employer: \_\_\_\_\_

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

Job Title/Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone \_\_\_\_\_ May we contact?  Yes  No

Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name of Current or Last Employer: \_\_\_\_\_

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

Job Title/Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone \_\_\_\_\_ May we contact?  Yes  No

Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_