

CHRIST UNITED METHODIST CHURCH APPLICATION FOR EMPLOYMENT

Applications are received and employees are hired without regard to race, creed, color, sex, age, national origin, marital status, or physical or mental handicap. In addition, we encourage the employment of veterans and the handicapped. The receipt of this application does not mean that job openings exist and does not obligate us in any way. We appreciate your interest in our organization. However, as a Christian Church that upholds biblical principles, we consider our employees to be an important part of the mission and ministry of the Lord Jesus Christ.

Date: _____

PERSONAL INFORMATION

Name: _____ Social Security #: _____
Last First Middle Initial

Present Address: _____
No. Street City State Zip

How long have you lived at the above address? _____ Home/Cell Phone: _____

Previous Address: _____
No. Street City State Zip

How long did you live there? _____

E- Mail address: _____

Over the age of 18? ___ Yes ___ No Are you a U.S. Citizen? ___ Yes ___ No

Is there an immediate member of your family employed and/or applying for a position at **CUMC** or

Crossroads? ___ Yes ___ No. If so whom? _____

EMPLOYMENT INFORMATION

Position Applying For: _____ Date Available: _____

Expected Income: _____ Type of Employment: ___ Full Time ___ Part Time ___ Temporary

Have you ever applied for a job with us before? ___ Yes ___ No If Yes, when? _____

Have you ever been bonded? ___ Yes ___ No. Have you ever been refused bond? ___ Yes ___ No

If yes, state reason and date: _____

Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor?

___ Yes ___ No If yes, please explain: _____

Is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young people? ___ Yes ___ No If yes, please explain: _____

Have you ever been convicted of any other crime? ___ Yes ___ No If yes, state the crime, date, court and place where offense occurred: _____

Does your present employer know of your plans to change employment: ___ Yes ___ No

EMPLOYMENT INFORMATION, CON'T.

Why do you desire to make a change? _____ Have you ever held a position of trust (handling money or confidential material)? ___ Yes ___ No. How much time have you lost from work during the past two years? _____ Would you have steady transportation to work? ___ Yes ___ No

List any experiences, skills, or qualifications which you feel would especially fit you for work with CUMC

FORMER EMPLOYERS (LIST BELOW THE LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST.)

Date Month and Year	Name and Address Of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

EDUCATION INFORMATION

Education	Years Completed	Degree RE Major Sub	Name of School	Location	Did you Graduate?
Grammar or High School					
Trade, Business or Correspondence					
College					
Graduate School					
Describe any other specialized or professional training (such as business, technical or nursing school). Include study courses given through public or private employment. State whether degree or certificate received.					

Can you submit copies of educational certificates, degrees or awards if asked to? ___ Yes ___ No

I hereby authorize and request any and all of my former employers and any other person, firm or corporation to furnish any and all information concerning my credit-worthiness and personal background, and I hereby release each such employer or other person, firm or corporation from any and all liability by reason of furnishing the requested information. I understand that in connection with this application, a consumer report and/or an investigative consumer report may be requested whereby information is obtained through personal interviews with my neighbors, friends or associates or with others with whom I am acquainted or who may have knowledge with respect to my character, general reputation, personal characteristics and mode of living, and hereby authorize the procurement of any such report. I understand that, upon my request, I have the right to know if any such report was requested and, if so, the name and address of the consumer reporting agency that furnished such report and in the case of a consumer investigative report, that I may inspect and receive a copy of such report by contacting such agency. I also understand that I have the right to receive a complete and accurate disclosure of the nature and scope of the information requested if I request such disclosure within a reasonable period of time.

I understand that if employed: 1) any misrepresentation or omission of facts requested in this application is cause for dismissal; and 2) my employment is for no definite period and I may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice.

Date: _____ SIGNATURE OF APPLICANT _____

PHOTO IDENTIFICATION REQUIRED WITH APPLICATION