



Christ United Methodist Church

3610 S. 18th Street
Lafayette, IN 47909
(765) 474-4313
www.christumchurch.org

EMPLOYMENT APPLICATION

Personal Information

Name (Last, First, MI)

Street Address

City, State, Zip

Home Phone Number

Work Phone Number

Fax Number

E-mail Address

Social Security Number

Driver's License Number/State/Expiration

(if job involves any driving)

Position Desired

Position Applied For

How did you learn about this position?

Date Available for Work

Desired Hours (full time/part time)

Education

	Name & Address of School	Course of Study	Total Years of Study	Degree/Diploma
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

List any seminars, classes or other education not listed above which may help qualify you for this position :

Work History			
List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references. DO NOT SUBSTITUTE "SEE RESUME" FOR THIS SECTION.			
Employer:		Start Date	End Date
Address		Starting Salary	Ending Salary
City, State, ZIP			
Phone Number		Fax Number	
Supervisor(s)		E-mail address of last supervisor	
Essential job functions of final position			
What value did you add to this company or its customers?			
Reason(s) for leaving			
Employer:		Start Date	End Date
Address		Starting Salary	Ending Salary
City, State, ZIP			
Phone Number		Fax Number	
Supervisor(s)		E-mail address of last supervisor	
Essential job functions of final position			
What value did you add to this company or its customers?			
Reason(s) for leaving			
Employer:		Start Date	End Date
Address		Starting Salary	Ending Salary
City, State, ZIP			
Phone Number		Fax Number	
Supervisor(s)		E-mail address of last supervisor	
Essential job functions of final position			
What value did you add to this company or its customers?			
Reason(s) for leaving			

Employer:		Start Date	End Date
Address		Starting Salary	Ending Salary
City, State, ZIP			
Phone Number		Fax Number	
Supervisor(s)		E-mail address of last supervisor	
Essential job functions of final position			
What value did you add to this company or its customers?			
Reason(s) for leaving			
Employer:		Start Date	End Date
Address		Starting Salary	Ending Salary
City, State, ZIP			
Phone Number		Fax Number	
Supervisor(s)		E-mail address of last supervisor	
Essential job functions of final position			
What value did you add to this company or its customers?			
Reason(s) for leaving			
Employer:		Start Date	End Date
Address		Starting Salary	Ending Salary
City, State, ZIP			
Phone Number		Fax Number	
Supervisor(s)		E-mail address of last supervisor	
Essential job functions of final position			
What value did you add to this company or its customers?			
Reason(s) for leaving			
Additional Information			
Identify formal job training that relates to this position:			
Identify what skills or certification you possess related to this position:			
If you are hired, what value will you add to our Organization?			

Describe what you believe are the most unique features of your work history:		
Have you ever been employed with this Organization before? If yes, when?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
May we contact your employer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently on "lay off" status and subject to recall?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you are under 18 years of age, can you provide proof of your eligibility to work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you legally eligible to be employed in the United States? (Proof of identity and eligibility will be required upon employment)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you able to perform all of the essential functions of the job for which you are applying with or without reasonable accommodation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If hired, are there any accommodations the Organization will need to provide so that you can perform all of the essential functions and duties of the position being applied for? If yes, explain:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If driving is a requirement of the position applied for, have you in the last 7 years been convicted of Driving Under the Influence "(DUI)"?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If hired, do you have a reliable means of transportation to and from work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If hired, would you be able to work overtime, as needed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Criminal History		
<ul style="list-style-type: none"> • Convictions will not necessarily bar applicants from employment. • Please do not reveal arrest records or convictions that have been sealed, expunged, annulled, pardoned, statutorily eradicated or impounded. 		
Have you ever been convicted or entered into a guilty plea for a felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:		

Military Information							
Have you served in the US Armed Forces?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	Branch of service	
From		To		Rank of induction		Highest rank	
Are you in the Reserve or National Guard?				<input type="checkbox"/> Yes		<input type="checkbox"/> No	
List any military education or experience you consider significant to the job for which you are applying.							
References (Persons familiar with your work achievements)							
Name		Business relationship		Business address		Business and home phone	
Years known							
1.							
2.							
3.							
Agreement							
<p>I authorize you to communicate with persons listed as references, former employers, and any others with whom you desire to check. I agree to hold such persons harmless with respect to any information they may give about me.</p> <p>If employed, I agree to engage in no outside activity which would involve a material conflict of interest with, or which could reflect adversely on the Organization. I understand this decision is to rest with the Organization.</p> <p>I certify that all statements made in this application and other supporting documentation are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably.</p> <p>I understand that any misrepresentation, deception, or false statement made in this <i>Employment Application</i> may result in my not being considered for employment, and if not discovered by the Organization until after my becoming employed, is grounds for, and may result in, my immediate termination.</p> <p>I understand this application will remain active up to a maximum period of 180 days. If after that time I desire further consideration for employment, I must then renew this application.</p> <p>In consideration of my employment, if I am employed, I agree to conform to the employment policies of the Organization, and I understand that my employment is “at will” and my employment and compensation can be terminated, with or without notice, at any time, at the option of either the Organization or myself. I understand that no representative of the Organization, other than the Senior Pastor, has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing and even then such agreement must be in writing signed by the Senior Pastor.</p>							
Signature of applicant				Date			