



Concord Church

Employment Application

Applicant Information

Position Applied for: _____

Date: _____

Full Name: _____

Last

First

M.I.

Current Address: _____

Street Address

Apartment/Unit #

City

State

ZIP Code

How long have you been at your current address? _____

If less than three (3) years, list prior addresses:

Address: _____

City

State

Zip Code

City

State

ZIP Code

Phone: () _____

E-mail Address: _____

Date of Birth: / / _____

Social Security No.: _____

Desired Salary: \$ _____

Do you have a current Driver's License? YES NO

If yes, State of Issue & License No. _____

Have you ever worked for Concord Church? YES NO

If yes, when? _____

Do you have any relatives currently on staff at Concord Church? YES NO

If yes, please give name(s): _____

Have you worked or attended school under any other names? YES NO

If yes, please give names: _____

Education

High School: _____

Address: _____

From: _____

To: _____

Did you graduate? YES NO

Degree: _____

College: _____

Address: _____

From: _____

To: _____

Did you graduate? YES NO

Degree: _____

Other: _____

Address: _____

From: _____

To: _____

Did you graduate? YES NO

Degree: _____

Previous Employment

Please list employers beginning with most present.

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Since your 18th birthday, have you been convicted, arrested or charged with a Federal, State, Local or Military violation, law ordinance or regulation?

Note: A conviction does not automatically mean you cannot be employed. The nature of the offense, how long ago it occurred, etc. are given consideration.

YES

NO

If yes, explain:

Except for minor traffic violations

Disclaimer and Signature

Terms of Employment – I understand that my employment at Concord Church is at will. This means that I or the Church can terminate this employment relationship at any time, with or without cause or notice. No agreement to the contrary is authorized by anyone unless made in writing and signed by the Senior Pastor or Chief Operating Officer.

Certification of Information – I certify that the information I have indicated is true and correct to the best of my knowledge. I understand that falsification or omission of any information may result in termination of my employment.

Smoke Free Environment- I am aware that smoke free environment means that use of tobacco products on Church premises is prohibited.

Employment Eligibility Documents- I understand that my employment is contingent upon my providing employment eligibility documents as required by the Immigration Reform Act of 1986.

I voluntarily and knowingly authorize any present and past employer to supervisor, university or institution of learning, administrator, law enforcement agency, federal agency, consumer reporting agency, private business, military branch, or the National Personnel Records Center, personal reference, and/or other persons to give records or information they may have concerning my criminal history, motor vehicle history, earnings history, and employment records, worker's compensation claims, general reputation, character, or any other information requested, for employment related purposes only. I voluntarily and knowingly unconditionally release any named or unnamed informant from any and all liability resulting from the furnishing of this information. This authorization shall be valid one year from the date signed and photographic or faxed copy of the authorization shall be as valid as the original. In compliance with the 1990 Americans Disabilities Act, a worker compensation search may be only when a conditional job offer exists.

I understand and agree that any misrepresentation or omission made by me regarding my application or any supplement hereto will be sufficient grounds for immediate termination

Physical Examination and Drug Testing – I agree that as a condition of employment, or continued employment the company may require that I undergo a physical examination (when required for all applicants for a particular class of jobs) and or drug test. I also understand that my application for employment may be denied or that my employment may be terminated based on the result of this testing.

Signature: _____ Date: _____