



ST. PAUL'S
 UNITED METHODIST CHURCH APPLICATION for EMPLOYMENT

APPLICANT INFORMATION:
 Please print and fill out all sections

Name: _____

Current Address:

Number Street City State Zip

Home Phone Cell Phone E-mail address

Employment Positions

Position(s) applying for: _____

- Temporary work () Yes or () No
- Regular part-time work () Yes or () No
- Regular full-time work () Yes or () No

What days and hours are you available? _____

If hired, what date can you begin work? ____/____/____

Salary desired: _____

Education, Training and Experience

	Name of School	City/State	Graduated Yes / No	Degree/ Diploma	Major
High School					
College					
College					
Vo Tech					

Military

Branch: _____ Rank: _____ Total Years of Service _____

Employment History

Are you currently employed? () Yes or () No

If you are currently employed, may we contact your current employer: () Yes or () No

Please describe past and present employment positions, dating back five years, accounting for all periods of unemployment. **Even if you have attached a resume, this section must be completed.**

Begin with Current Employment History

Name of Employer: _____ Supervisor: _____

Employer's Address _____
Street

City _____ State _____ Zip _____ Telephone _____

Position Title: _____ Employed From: _____ To: _____

Responsibilities: _____

Reason for leaving: _____

Beginning Salary: _____ Ending Salary: _____

Employment History Prior to Current Employment

Name of Employer: _____ Supervisor: _____

Employer's Address _____
Street

_____ City State Zip Telephone

Position Title: _____ Employed From: _____ To: _____

Responsibilities: _____

Reason for leaving: _____

Beginning Salary: _____ Ending Salary: _____

Employment History Prior to Current Employment

Name of Employer: _____ Supervisor: _____

Employer's Address _____
Street

_____ Telephone
City State Zip

Position Title: _____ Employed From: _____ To: _____

Responsibilities: _____

Reason for leaving: _____

Beginning Salary: _____ Ending Salary: _____

References

List below three persons who have knowledge of your work performance within the last five years. Please include job-related references only.

Name: _____

Business: _____

Address: _____

City, State, Zip _____

Telephone: _____

Name: _____

Business: _____

Address: _____

City, State, Zip _____

Telephone: _____

Name: _____

Business: _____

Address: _____

City, State, Zip _____

Telephone: _____

Are you willing to submit to and pass a background check? () Yes or () No

Have you ever been convicted of a criminal offense (felony or misdemeanor)? () Yes or () No
If yes, please describe the crime- state the nature of the crime(s), when and where convicted and disposition of the case.

List here persons affiliated with St. Paul's that you know _____

PLEASE READ AND INITIAL EACH PARAGRAPH, THEN SIGN BELOW

I certify that I have not purposely withheld any information that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true and correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure employment can be grounds for rejection of application or, if I am employed by St Paul's UMC, terms for my immediate termination.

I understand that if I am employed, my employment is not definite and can be terminated at any time either with or without prior notice, and by either me or St Paul's UMC.

I permit St Paul's UMC to examine my reference, record of employment, education record, and other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release St Paul's UMC, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such examination or revelation.

Applicant's Signature: _____

Date: _____