

**OPEN DOORS UNITED METHODIST CHURCH
APPLICATION FOR EMPLOYMENT**

DATE _____

PERSONAL INFORMATION

NAME _____ SOCIAL SECURITY NUMBER _____
LAST FIRST MIDDLE

PRESENT ADDRESS _____
STREET CITY STATE ZIP

PERMANENT ADDRESS _____
STREET CITY STATE ZIP

PHONE NO. _____

Have you been convicted of or pleaded no contest to a felony within the last five years? Yes _____ No _____

If yes, please explain: _____

EMPLOYMENT DESIRED

POSITION _____ DATE YOU CAN START _____ SALARY DESIRED _____

DAYS/HOURS AVAILABLE: Monday _____ Tuesday _____ Wednesday _____ Thursday _____
 Friday _____ Saturday _____ Sunday _____

ARE YOU EMPLOYED NOW? _____ IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? _____

REFERRED BY _____

| EDUCATION | NAME AND LOCATION OF SCHOOL | NO. OF YEARS ATTENDED | DID YOU GRADUATE? | SUBJECTS STUDIED |
|--|-----------------------------|-----------------------|-------------------|------------------|
| GRAMMAR SCHOOL | | | | |
| HIGH SCHOOL | | | | |
| COLLEGE | | | | |
| TRADE, BUSINESS OR CORRESPONDENCE SCHOOL | | | | |

MILITARY

| BRANCH | RANK | TOTAL YEARS OF SERVICE | SKILLS / DUTIES |
|------------------|------|------------------------|-----------------|
| | | | |
| RELATED DETAILS: | | | |

GENERAL

SPECIAL SKILLS _____

ACTIVITIES: (CIVIC, ATHLETIC, ETC.) _____

FORMER EMPLOYERS (List below last three employers, starting with last one first.)

| DATE MONTH AND YEAR | NAME / ADDRESS / PHONE OF EMPLOYER | SALARY | POSITION | REASON FOR LEAVING |
|------------------------|---------------------------------------|--------|----------|-----------------------|
| FROM _____ TO _____ | | | | |
| FROM _____ TO _____ | | | | |
| FROM _____ TO _____ | | | | |

WHICH OF THESE JOBS DID YOU LIKE BEST?

WHAT DID YOU LIKE MOST ABOUT THIS JOB?

REFERENCES (Give the names of three persons not related to you, whom you have known at least one year.)

| NAME | ADDRESS | BUSINESS | PHONE | YEARS ACQUAINTED |
|------|---------|----------|-------|---------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

IN CASE OF
EMERGENCY NOTIFY

NAME

ADDRESS

PHONE NO.

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected.

"I understand that if I am employed, my employment may be terminated at any time either with or without written notice, and by either me or the church.

"I permit the Wells United Methodist Church to examine and contact my references and other information provided of my prior history.

"Should I be considered for this position, I give my permission to Wells United Methodist Church to conduct a background check."

DATE

SIGNATURE

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY

DATE

REMARKS:

NEATNESS

ABILITY

HIRED

 Yes No

POSITION

SALARY/WAGE

DATE REPORTING TO WORK