



Employment Application

PERSONAL INFORMATION

Name		Social Security Number (optional)	
Address		How Long?	
City		State	Zip Code
Daytime Telephone		Home Telephone	
Position for which you are applying		E-mail	
Check the following options you would consider <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary		What is your minimum salary requirement?	
Do you have any commitments to another employer that might affect your employment with us?			Date available for work

EDUCATION & TRAINING

	SCHOOL NAME	CITY AND STATE	DEGREE/MAJOR COURSE OF STUDY	DEGREE RECEIVED
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No
College				<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No
Trade School				<input type="checkbox"/> Yes <input type="checkbox"/> No

List any other education, training, special skills or certificate/licenses that you possess related to the job:
List any machines, equipment or software programs on which you are qualified and experienced in operating:
List any languages that you speak fluently: _____ Read/write: _____
Do you have a valid driver's license in the this state? <input type="checkbox"/> Yes <input type="checkbox"/> No
Military experience? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, what branch? _____ Rank at separation: _____
Are you currently a member of The Ark Church? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, give dates: _____
If you are a member, describe your current ministry involvement:
If you are not a member, what church do you currently attend?

GENERAL INFORMATION

Can you, after employment, submit verification of your legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you 16 years old or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If under 18, state age: _____
Were you previously employed by The Ark Church? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain: _____
List any relatives currently working for The Ark Church:
During the past ten years, have you ever been convicted of, plead guilty to, or received probation, deferred adjudication, or any other type of alternative method of supervision or correction for a misdemeanor, having a penalty or imprisonment or a fine of more that \$500, or a felony? (Answering Yes is not an automatic bar to employment but will be considered in relation to specific job requirements.) <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain: _____
Can you perform the essential functions of the job? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you require any accommodation to perform the essential functions of the job? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain: _____

EMPLOYMENT HISTORY

MOST RECENT JOB HELD		
Name of Employer	Type of Business	
Address	City/State	Zip Code
Name and Title of Supervisor	Telephone Number	
Brief Description of Duties	Type of Employment <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Temporary	
Reason for Leaving		
May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Last Salary \$	

PREVIOUS EMPLOYMENT		
Name of Employer	Type of Business	
Address	City/State	Zip Code
Name and Title of Supervisor	Telephone Number	
Brief Description of Duties	Type of Employment <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Temporary	
Reason for Leaving		
May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Last Salary \$	

PREVIOUS EMPLOYMENT		
Name of Employer	Type of Business	
Address	City/State	Zip Code
Name and Title of Supervisor	Telephone Number	
Brief Description of Duties	Type of Employment <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Temporary	
Reason for Leaving		
May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Last Salary \$	

PREVIOUS EMPLOYMENT		
Name of Employer	Type of Business	
Address	City/State	Zip Code
Name and Title of Supervisor	Telephone Number	
Brief Description of Duties	Type of Employment <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Temporary	
Reason for Leaving		
May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Last Salary \$	

REFERENCES

List three personal references.

NAME	OCCUPATION/ASSOCIATION	TELEPHONE	E-MAIL
1.			
2.			
3.			

List three business references.

NAME	COMPANY	TELEPHONE	E-MAIL
1.			
2.			
3.			

EMERGENCY CONTACTS

Persons to be notified in case of emergency.

Name	Relationship	Telephone
Address / City / State / Zip		E-mail
Name	Relationship	Telephone
Address		E-mail

ADDITIONAL INFORMATION

Please include any other information that would be helpful to use in consideration for your employment i.e. work experience, articles/books published, activities, honors received, etc.

AGREEMENT Please read the following statement careful

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to be the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment, and may be considered justification for dismissal if discovered at a later date.

I authorize all persons listed above (and on accompanying resume, if any) to give The Ark Church any and all information concerning my previous employment and education and any pertinent information they may have, personal or otherwise, and release all parties, such persons and The Ark Church from liability for any damage that may result from furnishing same to The Ark Church.

If employed by The Ark Church, I agree to abide by the policies and procedures of The Ark Church. I further understand that my employment can be terminated with or without cause or notice, at any time, at the discretion of The Ark Church or myself.

I understand that The Ark Church may obtain a consumer and/or investigative consumer report for employment purposes that may include information as to my character, general reputation, personal characteristics, mode of living, work habits performed and experience, along with reason for termination of past employment, financial/credit history or criminal/civil/driving record history. By signing this application, I authorize the procurement of consumer and/or investigation and if hired, at any time during my employment.

Signature	Date
Print Name	



Today's Date:

Authorization for Release of Background Information

In connection with my application for employment with The Ark Church, I authorize The Ark Church to solicit background information relative to my criminal background history. I understand that The Ark Church may conduct inquiries into my background that may include criminal records, personal references and other public record reports pertaining to me.

I authorize without any reservation any person, agency, or other entity contacted by The Ark Church for purposes of obtaining background report information, to furnish the above mentioned information.

I release The Ark Church, their respective employees and all agencies and entities providing information or reports about me from any and all liability arising out of furnishing any information or reports.

PLEASE PRINT

Last Name		First Name	
City of Birth	State	County	
AKA / Maiden Name			
Date of Birth		Social Security Number	

Please note that if your previous address is a rural route, or PO Box, we must have City & County mail was delivered to.

Current Address			
City	County	State	Zip
How long at this address? (Months/Years)			

Previous Address			
City	County	State	Zip
How long at this address? (Months/Years)			

Previous Address			
City	County	State	Zip
How long at this address? (Months/Years)			

Signature	Date
Print Name	