*Job Application*

|  |  |  |  |
| --- | --- | --- | --- |
| Position Applied For: |  | Date: |  |

# Thank you for your interest in serving at Atlee Church. Only final candidates for posted openings will be contacted personally.

## GENERAL INFORMATION

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name (last, first, middle initial): | | | | |  |
| Social Security Number: | | | |  | |
| Street Address: | | |  | | |
| City, State, Zip: | | |  | | |
| Work Phone: | |  | | | |
| Cell Phone: | |  | | | |
| Email: |  | | | | |

Are you authorized to work in the United States? (Proof of authorization will be required post hire.) Yes No



## TRAINING AND EDUCATION

Circle Highest Grade Completed: 8 9 10 11 12 GED

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| COLLEGES / OTHER TRAINING |  | MAJOR/SUBJECT |  | DEGREE/CERTIFICATION |  | DATE |
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## ADDITIONAL SKILLS

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| --- | --- | --- | --- | --- |
| SKILLS |  | TYPE OF EXPERIENCE |  | LEVEL OF EXPERTISE |
| Office Equipment, (Typing Speed, Programs, Etc.) |  |  |  |  |
| Technical Skills, Professional Licenses |  |  |  |  |
| Computers |  |  |  |  |
| Software |  |  |  |  |
| Other |  |  |  |  |

Can you perform the essential functions of the job with or without reasonable accommodation?

Yes No

What are your top three (3) Spiritual Gifts in order?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1 |  |  | | | | |
| 2 |  |  | | | | |
| 3 |  |  | | | | |
| What date are you available to start work? | | |  |  | Desired Salary Range: |  |

What are you available to work? Full-Time Part-Time

## BACKGROUND INFORMATION

*Each case is considered separately, based on job duties and performance areas.*

Do you have a Virginia State Drivers License? Yes No Other State

(If position involves driving) Have you been convicted, pleaded to no contention, or paid a fine for any traffic violation in the past three (3) years? Yes No

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| --- | --- | --- |
| If Yes Please Explain: |  |  |

Have you been convicted of a felony, or served time in prison within the last ten (10) years?

Yes No

Conviction will not necessarily bar you from employment. If yes please explain:

|  |
| --- |
|  |

## HOW DID YOU HEAR ABOUT THIS POSITION? (Circle all that apply)

Friend / Relative Newspaper Internet Staff Church Bulletin Church Website

## EMPLOYMENT HISTORY

*Beginning with your present or most recent employment, list your employment history. Include self-employment, military history, volunteer experience, and periods of unemployment. The following MUST be completed, even if resume’ is submitted.*

Are you currently employed? Yes No

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Employer: | |  | |  | | | | | | | | | | | | | | | | | | | |
| Employed From: | | | | | |  | | | | | To: | | | |  |  | | | | |  | | |
| Address: |  | |  | | | | | | | | | | | | | | Supervisor: | | |  | | | |
| Phone: |  | |  | | | | | | Hours Worked: | | | |  | | | | | Starting Salary: | | | |  | |
| Position: |  | |  | | | | | | | | | | | | | |  | | Ending Salary: | | | |  |
| Primary Duties: | | | | |  | | | | | | | | | | | | | | | | | | |
| Number of employees supervised by you: | | | | | | | | | |  | | | | May we contact this employer?  Yes No | | | | | | | | | |
| Supervisors Phone Number: | | | | | | | |  | | | |  | | | | | | | | | | | |
| Reason for leaving: | | | | | | |  | | | | | | | | | | | | | | | | |

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| Employer: | |  | |  | | | | | | | | | | | | | | | | | | | |
| Employed From: | | | | | |  | | | | | To: | | | |  |  | | | | |  | | |
| Address: |  | |  | | | | | | | | | | | | | | Supervisor: | | |  | | | |
| Phone: |  | |  | | | | | | Hours Worked: | | | |  | | | | | Starting Salary: | | | |  | |
| Position: |  | |  | | | | | | | | | | | | | |  | | Ending Salary: | | | |  |
| Primary Duties: | | | | |  | | | | | | | | | | | | | | | | | | |
| Number of employees supervised by you: | | | | | | | | | |  | | | | May we contact this employer?  Yes No | | | | | | | | | |
| Supervisors Phone Number: | | | | | | | |  | | | |  | | | | | | | | | | | |
| Reason for leaving: | | | | | | |  | | | | | | | | | | | | | | | | |

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| Employer: | |  | |  | | | | | | | | | | | | | | | | | | | |
| Employed From: | | | | | |  | | | | | To: | | | |  |  | | | | |  | | |
| Address: |  | |  | | | | | | | | | | | | | | Supervisor: | | |  | | | |
| Phone: |  | |  | | | | | | Hours Worked: | | | |  | | | | | Starting Salary: | | | |  | |
| Position: |  | |  | | | | | | | | | | | | | |  | | Ending Salary: | | | |  |
| Primary Duties: | | | | |  | | | | | | | | | | | | | | | | | | |
| Number of employees supervised by you: | | | | | | | | | |  | | | | May we contact this employer?  Yes No | | | | | | | | | |
| Supervisors Phone Number: | | | | | | | |  | | | |  | | | | | | | | | | | |
| Reason for leaving: | | | | | | |  | | | | | | | | | | | | | | | | |

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| Employer: | |  | |  | | | | | | | | | | | | | | | | | | | |
| Employed From: | | | | | |  | | | | | To: | | | |  |  | | | | |  | | |
| Address: |  | |  | | | | | | | | | | | | | | Supervisor: | | |  | | | |
| Phone: |  | |  | | | | | | Hours Worked: | | | |  | | | | | Starting Salary: | | | |  | |
| Position: |  | |  | | | | | | | | | | | | | |  | | Ending Salary: | | | |  |
| Primary Duties: | | | | |  | | | | | | | | | | | | | | | | | | |
| Number of employees supervised by you: | | | | | | | | | |  | | | | May we contact this employer?  Yes No | | | | | | | | | |
| Supervisors Phone Number: | | | | | | | |  | | | |  | | | | | | | | | | | |
| Reason for leaving: | | | | | | |  | | | | | | | | | | | | | | | | |

## PROFESSIONAL REFERENCES

*Please list below any people in addition to supervisors listed above, who can responsibly evaluate your work performance. (Use additional paper if necessary)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NAME | | PLACE OF EMPLOYMENT | | PHONE NUMBER |
|  |  |  |  |  |
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*It is understood and agreed that the foregoing is true to the best of my knowledge, and that my falsification of this application will be grounds for elimination from further consideration. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.*

*I authorize Atlee Community Church to solicit information regarding my character, general reputation, credit, previous employment, and similar background information, and to contact any and all references I have given on my application.  I release all parties and persons connected with any such request for information from all claims, liabilities, and damages that may arise out of the furnishing of such information.  If employed, I release Atlee Community Church from any liability for future references it may provide regarding my work history at the church.*

*I understand that employment with the Employer is “at-will”, which means that either Atlee Community Church or I can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute.  All employment is continued on that basis.  I understand, also, that I am required to abide by all rules and regulations of the employer.*

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| --- | --- | --- | --- |
| Applicant’s Signature: |  | Date: |  |