## **EMPLOYMENT APPLICATION**

## **Epworth United Methodist Church**

Name:		To	day's Date	e:
Address:				
Home Phone:	Alt Phone:			
Referred by:				
Position Applied For:				
Date you can start:				
Are you over the age of 18? Yes	No	)		
Have you ever been employed by Epworth UMC If yes, when?		es N	No	
Are you willing to work (as necessary):  Weekends? Yes No  On Call (ex. Funeral, etc.) Yes	s No			
Do you have a valid North Dakota Drivers Licen	se? Yes	s No		
Are you a citizen of the U.S. or do you have the	legal right to b	e employed i	n the Unit	ed States?
Are you willing and able to perform, in a reasona position for which you have applied?	able and safe m	nanner, all act	tivities inv	No colved in the No
A job description, for the position applied for, is attached.				
If no, please explain.				
Have you been convicted of a crime within the la driving under the influence of alcohol or drugs?	ast 5 years (exc Yes	_	r traffic vio	olations) including
If yes, state the nature of offense, when, where as	nd disposition:			

<sup>\*</sup>A conviction record will not necessarily be a bar to employment. This information will be used for job-related purposes and only to the extent permitted by law.

<b>EMPLOYMENT HISTORY:</b> List in order, last or current employer first. Account for any gaps in your employment.				
Employer Name:	Telephone:			
Address:				
Supervisor:				
Dates Employed: From:	To:			
Position Held:				
Reason for Leaving:				
Duties:				
Employer Name:	Telephone:			
Address:				
Supervisor:				
Dates Employed: From:	To:			
Position Held:				
Reason for Leaving:				
Duties:				
Employer Name:	Telephone:			
Address:				
Supervisor:				
Dates Employed: From:	To:			
Position Held:				
Reason for Leaving:				
Duties:				
	history, please use the back of this page or additional sheets of page			

<u>Er</u>	DUCATION:				
Sc	chool:	Address:			
Co	ourse of Study:	Years Completed:			
Di Ar	Did you graduate? Diploma or Degree Received: Are you a veteran?				
	ECIAL SKILLS: ease list technology and programs in	n which you are proficient.			
De	escribe your capabilities in working	with children of various ages and abilities.			
	ave you ever been denied the opport	tunity to work with children? Yes No			
tha	ease describe why you are interested at you feel especially qualify you for the second				
	•				
1.	NameAddress				
2.	Name				
	Address_				
3.	Name				
	. 11	Years Known			

## AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment. I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with Epworth UMC, creates an actual or implied contract of employment. I understand that, if I accept employment with Epworth UMC, it will be at an at-will basis. This means that either Epworth UMC or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.						
I authorize Epworth UMC to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release Epworth UMC and its employees from all liability arising from such investigation.						
Signature of Applicant:	Date					
or disability, or status as a Vietnam-era or special disabled ve employment. Federal laws require that employers hire only individuals v compliance with such laws, Epworth UMC will verify the st connection, all offers of employment are subject to verification	out regard to race, color, religion, sex, national origin, age, handicap teran in accordance with Federal laws prohibiting discrimination in who are authorized to be lawfully employed in the United States. In atus of every individual offered employment with the Church. In this on of the applicant's identity and employment authorization, and it will y law to verify your identification and employment authorization upon					
Interviewed By:	Date:					
Hired: Yes No						
Starting Date:						

Salary: