

EMPLOYMENT APPLICATION



APPLICANT INFORMATION

Last Name _____ First _____ M.I. _____ D.O.B. _____

Street Address _____ Apartment/Unit # _____

City _____ State _____ ZIP _____

Phone _____ E-mail Address _____

Date Available _____ Social Security No. _____ Desired Salary _____

Position Applied for _____

Are you authorized to work in the U. S.? YES NO

Do/will you require immigration sponsorship to work for Eastbrook Church? YES NO

Do you have a valid driver's license? YES NO If no, explain: _____

Have you ever been convicted of a crime? YES NO If yes, give date/court: _____

EDUCATION

High School _____ Address _____

From _____ To _____ Did you graduate? YES NO Degree _____

College _____ Address _____

From _____ To _____ Did you graduate? YES NO Degree _____

Other _____ Address _____

From _____ To _____ Did you graduate? YES NO Degree _____

REFERENCES

Please list three professional references.

Full Name _____ Relationship _____

Company _____ Phone (_____) _____

Address _____

Full Name _____ Relationship _____

Company _____ Phone (_____) _____

Address _____

Full Name _____ Relationship _____

Company _____ Phone (_____) _____

Address _____

PREVIOUS EMPLOYMENT

Company _____ Phone (_____) _____

Address _____ Supervisor _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? YES NO If not, why? _____

Company _____ Phone (_____) _____

Address _____ Supervisor _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? YES NO If not, why? _____

Company _____ Phone (_____) _____

Address _____ Supervisor _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? YES NO If not, why? _____

MILITARY SERVICE

Branch _____ From _____ To _____

Rank at Discharge _____ Type of Discharge _____

If other than honorable, explain: _____

ADDITIONAL INFORMATION

Membership in professional and civic organizations, special accomplishments, awards, etc.

DISCLAIMER AND SIGNATURE

Please read and understand this statement before signing your application:

The information I have provided in this Application for Employment is true, correct and complete. False, incomplete or misrepresented information of any kind will result in rejection of my application or, if discovered after I am employed, termination of my employment.

I authorize Eastbrook Church ("Eastbrook") to contact and obtain information about me from previous employers, educational institutions and "references" I have provided, and any other party necessary to verify the accuracy of information I have disclosed in this application, a related employment resume or a personal interview. In consideration for Eastbrook's consideration of my Application, I waive all rights and claims I may otherwise have against Eastbrook or its representatives, for seeking, collecting and using information to evaluate my employment request and against any and all other persons, corporations or organizations who provide information for this purpose.

This application will expire in 30 days. After that date, unless otherwise notified, my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement. If I accept an offer of employment I understand that either Eastbrook or I will have the right to terminate my employment at any time, with or without notice, unless required by law, and for any lawful reason. I understand that no one, other than Eastbrook Church's Council, has authority to enter into any employment agreement with terms contrary to the foregoing and then only if the agreement is in writing signed by a representative authorized by Eastbrook Church's Council.

I fully understand and acknowledge all the above terms and conditions.

Signature _____ Date _____

FOR EMPLOYER'S USE ONLY

REFERENCE CHECK		
Employer	Person Contacted	Results
1		
2		
3		

TEST RESULTS		
Test Administered	Rating	Analysis and Comments