



BEREAN CHRISTIAN CHURCH

EMPLOYMENT APPLICATION
(Please PRINT clearly)

Date: _____

PERSONAL INFORMATION

Name: _____
LAST FIRST M.I.

Address: _____
STREET CITY STATE ZIP CODE

Telephone #: _____ Email Address: _____

If necessary, best time to call you at home is: _____ : _____ AM
PM

Are you currently employed? Yes No May we contact you at work? Yes No
AM

If yes, work number and best time to call: _____ : _____ PM

Are you over 18 years of age? Yes No

List positions previously applied for with Berean: _____ None

Are you legally eligible for employment in this country? Yes No

WORK PREFERENCE

Position for which you are applying: _____ Date available to work: ____/____/____

Type of employment desired: Full-time Part-time Temporary Seasonal

Will you relocate if job requires it? Yes No Will you travel if job requires it? Yes No

Are you able to meet the attendance requirements of the position? Yes No

Will you work overtime, if required? Yes No Salary Requested: \$ _____

EDUCATION

School Level	Name and Location of School	# of Years Attended	Did you graduate?	Degree Received
High School				
College/University				
Trade, Business or Other School				

EMPLOYMENT HISTORY

Provide the following information of your current and past employers, assignments or volunteer activities, starting with the **most recent** (use additional sheets if necessary). Explain any gaps in employment in **Comments** section below.

Company Name: _____ **Telephone:** _____

Address: _____

Name of Supervisor: _____ May we contact: Yes No

Dates Employed: From: _____ To: _____ Rate of Pay: Starting: _____ Ending: _____

State job titles and description of job duties: _____

Reason for Leaving: _____

Company Name: _____ **Telephone:** _____

Address: _____

Name of Supervisor: _____ May we contact: Yes No

Dates Employed: From: _____ To: _____ Rate of Pay: Starting: _____ Ending: _____

State job titles and description of job duties: _____

Reason for Leaving: _____

Company Name: _____ **Telephone:** _____

Address: _____

Name of Supervisor: _____ May we contact: Yes No

Dates Employed: From: _____ To: _____ Rate of Pay: Starting: _____ Ending: _____

State job titles and description of job duties: _____

Reason for Leaving: _____

Comments (Including the explanation of any gaps in employment): _____

SKILLS, TRAINING OR CERTIFICATIONS

Please list any special skills, training or certifications.

Have you ever been convicted of a crime? Yes No

Answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness, and nature of the violation, rehabilitation and position applied for will be taken into account.

If "yes", please provide dates(s) and details: _____

REFERENCES

(Please list three persons **not related** to you who know your qualifications.)

NAME	POSITION/TITLE	PHONE #	RELATIONSHIP

AUTHORIZATION

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above shall give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that my result from utilization of such information.

SIGNATURE

PRINT NAME

DATE