
Elim Lutheran Church

Employment Application

Date _____ Last Name _____ First Name _____

Present Address

No. & Street _____ City _____

state _____ zip _____

() _____ () _____
Business Phone Home Phone

Employment Desired

Position applying for: _____

Are you applying for:

Regular full-time work? Yes No

Regular part-time work? Yes No

Temporary work, e.g., summer or holiday work? Yes No

Would you be available to work overtime, if necessary? Yes No

If hired, on what date can you start work? ____/____/____ Salary/wage desired: _____

Personal Information

Have you ever applied to or worked for Elim Lutheran Church before? Yes No

If yes, when? _____

Do you have any friends or relatives working for Elim Lutheran Church? Yes No

If yes, state name(s) and relationship:

_____ Name Relationship _____

How did you hear about the position at Elim Lutheran Church?

If hired, would you have a reliable means of transportation to and from work? Yes No

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? Yes No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes No
 If no, describe the functions that cannot be performed.

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

Are you currently employed?..... Yes No

If so, may we contact your current employer? Yes No

Education, Training and Experience

School	Name and Address	No. of years Completed	Did you Graduate?	Degree or Diploma
High School	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	Name _____			
	Address _____			
	_____ - _____			
	City _____ State _____ Zip _____			
College/ University	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	Name _____			
	Address _____			
	_____ - _____			
	City _____ State _____ Zip _____			
College/ University	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	Name _____			
	Address _____			
	_____ - _____			
	City _____ State _____ Zip _____			
Vocational/ Business	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	Name _____			
	Address _____			
	_____ - _____			
	City _____ State _____ Zip _____			

Do you speak, write or understand any foreign languages? Yes No

If yes, which language(s)? _____

Do you have any other experience, training, qualifications or skills which you feel make you especially suited for work at Elim?..... Yes No

If so, please explain:

Military Service

Have you obtained any special skills or abilities as the result of service in the military? Yes No
If so, describe:

Employment History

List below all present and past employment starting with your most recent employer

_____ Name of Employer	() _ Telephone No.
_____ Type of Business	_____ Your Supervisor's Name
_____ Address & Street	_____ City
Date of Employment: ___/___/___ From	___/___/___ To
_____ Your Position and Duties	
_____ Reason for Leaving	

May we contact this employer for a reference? Yes No

_____ Name of Employer	() _ Telephone No.
_____ Type of Business	_____ Your Supervisor's Name
_____ Address & Street	_____ City
Date of Employment: ___/___/___ From	___/___/___ To
_____ Your Position and Duties	
_____ Reason for Leaving	

May we contact this employer for a reference? Yes No

