
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	Name _____ Address _____ City _____ State _____ Zip _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
College/ University	Name _____ Address _____ City _____ State _____ Zip _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
College/ University	Name _____ Address _____ City _____ State _____ Zip _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Vocational/ Business	Name _____ Address _____ City _____ State _____ Zip _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

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? <input type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No	

References

List below two persons not related to you who have knowledge of your **work performance** within the last three years.

_____	_____	(____) _____
First Name	Last Name	Telephone No
_____	_____	_____ - _____
Address & Street	City	State Zip
_____	_____	
Occupation	No. of Years Acquainted	

_____	_____	(____) _____
First Name	Last Name	Telephone No
_____	_____	_____ - _____
Address & Street	City	State Zip
_____	_____	
Occupation	No. of Years Acquainted	

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld any information that might adversely
 Initials affect my chances for employment and that the answers given by me are true and correct to
 the best of my knowledge. I further certify that I, the undersigned applicant, have personally
 completed this application. I understand that any omission or misstatement of material fact
 on this application or on any document used to secure employment shall be grounds for
 rejection of this application or for immediate discharge if I am employed, regardless of the
 time elapsed before discovery.

_____ I hereby authorize the Church to thoroughly investigate my references, work record,
 Initials education and other matters related to my suitability for employment and, further, authorize
 the references I have listed to disclose to the Church any and all letters, reports and other
 information related to my work records, without giving me prior notice of such disclosure. In
 addition, I hereby release the Church, my former employers and all other persons,
 corporations, partnerships and associations from any and all claims, demands or liabilities
 arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview
 Initials which may be granted or during my employment, if hired, is intended to create an
 employment contract between me and the Church. In addition, I understand and agree that if
 I am employed, my employment is for no definite or determinable period and may be
 terminated at any time, with or without prior notice, at the option of either myself or the
 Church, and that no promises or representations contrary to the foregoing are binding on the
 Church unless made in writing and signed by me and the Church's designated
 representative.

_____ Should a search of public records (including records documenting an arrest, indictment,
 Initials conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal
 personnel employed by the Church, I am entitled to copies of any such public records
 obtained by the Church unless I mark the following check box. If I am not hired as a result of
 such information, I am entitled to a copy of any such records even though I have checked the
 box: I waive receipt of a copy of any public record described in the paragraph above.

_____ **Date** **Applicant's Signature**