

# EMPLOYMENT APPLICATION



Church of the Lakes is an equal opportunity employer and does not discriminate against applicants or employees on the basis of sex, race, color, religion, national origin, ancestry or age (40 years of age and over). In addition, Church of the Lakes does not discriminate against qualified individual with disabilities.

## PLEASE PRINT

### PERSONAL

1. Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

2. Address \_\_\_\_\_

3. Phone \_\_\_\_\_ (Bus.) \_\_\_\_\_

4. Position(s) applied for \_\_\_\_\_

5. Date available to start \_\_\_\_\_

6. Are you over 18 yrs. of age \_\_\_\_\_ If not, you will need to get a work permit.

7. Have you ever been convicted of a misdemeanor or felony? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

8. Have you applied to work with us before? \_\_\_\_\_ If yes, when \_\_\_\_\_

9. Are you willing to work an irregular schedule, overtime on different shifts and on weekends when necessary \_\_\_\_\_

\*If hired, proof of your identity and employment eligibility in the United States must be established by appropriate documentation at the time you begin work at Church of the Lakes.

### EDUCATION (List highest level of schooling you completed)

School's Name & Address \_\_\_\_\_

Graduated \_\_\_ Yes \_\_\_ No, if no, number of yrs. completed \_\_\_\_\_ Area of study \_\_\_\_\_

If you served in the U.S. Military Service, please provide the 1) Branch 2) Highest Rank Achieved 3) Dates of service

\_\_\_\_\_

\_\_\_\_\_

EMPLOYMENT HISTORY (begin with your last position; please use additional sheet if needed)

Employer's Name and address                      Supervisor                      Position(s) held                      Reason for leaving

1. \_\_\_\_\_

Date of employment: From \_\_\_\_\_ to \_\_\_\_\_

Your duties \_\_\_\_\_

2. \_\_\_\_\_

Date of employment: From \_\_\_\_\_ to \_\_\_\_\_

Your duties \_\_\_\_\_

3. \_\_\_\_\_

Date of employment: From \_\_\_\_\_ to \_\_\_\_\_

Your duties \_\_\_\_\_

REFERENCES – please provide 2 personal references

1. Name, email address and phone #: \_\_\_\_\_

\_\_\_\_\_

2. Name, email address and phone #: \_\_\_\_\_

\_\_\_\_\_

CERTIFICATION and AUTHORIZATION (please read and sign below)

I certify that all facts contained in the application are true and complete and acknowledge that Church of the Lakes is relying on the accuracy of the information provided. I authorize Church of the Lakes to verify the accuracy of the information provided herein, and I authorize former employers, educational institutions and national background check agencies to release information concerning me to the Church of the Lakes. I also authorize Church of the Lakes to give references and provide information about me in response to inquiries subsequent to my employment if hired. I understand that falsification, misrepresentation or omission of requested facts may result in denial of employment or, if employed, may result in immediate dismissal. I understand and agree that, if hired, my employment will be for no definite period and may, regardless of the date of payment of wages, be terminated at any time without previous notice and with or without reason, at the will of either myself or the Church of the Lakes. I also understand and agree that no one has authority to promise me job security or continued employment, except the SPR committee in a formal written agreement signed by both of us.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

9/8/2022