NEWARK UNITED METHODIST CHURCH

Application for Employment

Instructions: Print *clearly* in black or blue ink. Answer all questions. Sign and date the form.

Personal Information	
First Name	
Middle Name	
Last Name	
Street Address	
City, State, Zip Code	-
Home Phone Number ()	
Cell Phone Number ()	
Email	
Have you ever applied to worked or volunteer for the child of the provident of the second sec	
Do you have any friends, relatives, or acquaintances wor at the church? [] Y or [] N If yes, state name & relationship:	
If hired, would you have transportation to/from work?] Y or [] N
Are you over the age of 18? [] Y or [] N	
If hired, would you be able to present evidence of your Uright to work in the United States? [] Y or [] N	J.S. citizenship or proof of your legal
Have you been convicted of or pleaded no contest to a fe []Y or []N	elony within the last five years?
If yes, please describe the crime - state nature of the crim disposition of the case	
Are you willing to authorize a criminal background chec	

If hired, are you willing to submit to and pass a controlled substance test? [] Y or [] N

Position and Availability

Position Applied For:

Are you applying for:

- Temporary work such as summer or holiday work? [] Y or [] N
- Regular part-time work? [] Y or [] N
- Regular full-time work? [] Y or [] N

Days/Hours Available

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____ Saturday _____ Sunday _____

Hours Available: from _____ to _____

If applying for temporary work, when will you be available?

If hired, on what date can you start working? ___ / ___ /

Can you work on the weekends? [] Y or [] N

Can you work evenings? [] Y or [] N

Are you available to work overtime? [] Y or [] N

Are you able to perform the essential functions of the job for which you are applying, either with / without reasonable accommodation?

[]Y or []N

If no, describe the functions that cannot be performed

Education, Training and Experience

High School: School name:
School address:
School city, state, zip:
School erty, state, zip
Number of years completed:
Did you graduate? [] Y or [] N
Degree / diploma earned:
College / University:
School name:
School address:
School city, state, zip:
Number of years completed:
Did you graduate? [] Y or [] N
Degree / diploma earned:
Vocational School:
Name:
Address:
Address:City, state, zip:
Address:City, state, zip:
Address: City, state, zip: Number of years completed: Did you graduate? [] Y or [] N
Address: City, state, zip: Number of years completed: Did you graduate? [] Y or [] N
Address:City, state, zip:
Address: City, state, zip: Number of years completed: Did you graduate? [] Y or [] N Degree / diploma? : Military:
Address: City, state, zip: Number of years completed: Did you graduate? [] Y or [] N Degree / diploma? : Military: Branch:
Address: City, state, zip: Number of years completed: Did you graduate? [] Y or [] N Degree / diploma? : Military: Branch: Rank in Military:
Address: City, state, zip: Number of years completed: Did you graduate? [] Y or [] N Degree / diploma? : Military: Branch: Rank in Military: Total Years of Service:
Address: City, state, zip: Number of years completed: Did you graduate? [] Y or [] N Degree / diploma? : Military: Branch: Rank in Military: Total Years of Service: Skills/duties:
Address: City, state, zip: Number of years completed: Did you graduate? [] Y or [] N Degree / diploma? : Military: Branch: Rank in Military: Total Years of Service:

Do you speak, write or understand any foreign languages? [] Y or [] N

If yes, describe which languages(s) and how fluent of a speaker you consider yourself to be.

Employment History

You should be prepared to detail each position for the past five years, and account for any gaps in employment during that period.

Are you currently employed? [] Y or [] N

If you are currently employed, may we contact your current employer? [] Y or [] N

Name of Employer:
Name of Supervisor:
Telephone Number:
Business Type:
Address:
City, state, zip:
Length of Employment (Include Dates):
Position & Duties:
Reason for Leaving:
Previous Positions:
Include for each employer/position for the past five years:
Name of Employer:
Name of Supervisor:
Telephone Number:
Business Type:
Address:
City, state, zip:
Length of Employment (Include Dates):
Position & Duties:
Reason for Leaving:
May we contact this employer for references? [] Y or [] N

References

List below three persons who have knowledge of your work performance within the last four years. Please include professional references only.

Name - First, Last:
Telephone Number:
Address:
City, state, zip:
Occupation:
Number of Years Acquainted:
Nouse First Last
Name - First, Last:
Telephone Number:
Address:
City, state, zip:
Occupation:
Number of Years Acquainted:
Name - First, Last:
Telephone Number:
Address:
City, state, zip:
Occupation:
Number of Years Acquainted:

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired.

I authorize the verification of any or all information listed above. I further agree by signing this application to provide the church written notice of any new arrest, conviction, or substantiated child abuse within 72 hours.