



APPLICATION FOR EMPLOYMENT

Chapel Springs Assembly of God
11500 New Life Way
Bristow, VA 20136
Telephone: 703/368-2895

Prospective employees will receive consideration without discrimination because of race, color, sex, age, national origin, handicap or veteran status.
(Please answer all questions. If not applicable, mark "NA".)

Position(s) applied for _____ Date of Application _____

Name _____
Last First Middle

Address _____
Street City State Zip

Telephone # _____ Mobile # _____ Social Security # _____

Email: _____ Are you 18 years of age or older? Yes No

If you are under 18, and it is required, can you furnish a work permit? Yes No

If no, please explain _____

Have you ever been employed here before? Yes No

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

Date available for work _____ Type of employment desired Full-Time Part-Time Temporary

Have you ever been convicted of or pled guilty or no contest to a crime other than a minor traffic violation or are you now under charges for any criminal offense? A criminal conviction will not necessarily disqualify you from consideration for employment. Yes No (If yes, please explain fully on a separate sheet.)

Are you able to perform the essential functions of the position for which you are applying with or without reasonable accommodations? Yes No.

If no, please explain

_____ Driver's license number if driving is an essential job function _____

State _____

Background (Applicable to all applicants)

Are you a Christian? _____ How long have you been a Christian? _____

Please describe how you came to know Christ as your personal Savior. Also describe how Christ has been working in your life since your conversion experience.

Please provide the following information concerning your church attendance over the past five years:

Dates Attended

Name & Address

Phone

Current: _____

Previous: _____

Previous: _____

Employment History

Provide the following information of your past four (4) employers, assignments or volunteer activities, starting with the most recent.

From	To	Employer	Telephone
Job Title		Address	
Immediate Supervisor and Title		Summarize the nature or work performed and job responsibilities	
May we contact?	Yes No	Type of Employment: F/T P/T Temporary/Contractual	
Reason for Leaving		Hourly rate/ Salary Start \$ _____ Per _____ Final \$ _____ Per _____	
From	To	Employer	Telephone
Job Title		Address	
Immediate Supervisor and Title		Summarize the nature or work performed and job responsibilities	
May we contact?	Yes No	Type of Employment: F/T P/T Temporary/Contractual	
Reason for Leaving		Hourly rate/ Salary Start \$ _____ Per _____ Final \$ _____ Per _____	
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Immediate Supervisor and Title		Summarize the nature or work performed and job responsibilities	
May we contact?	Yes No	Type of Employment: F/T P/T Temporary/Contractual	
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From	To	Employer	Telephone
Job Title		Address	
Immediate Supervisor and Title		Summarize the nature or work performed and job responsibilities	
May we contact?	Yes No	Type of Employment: F/T P/T Temporary/Contractual	
Reason for Leaving		Hourly rate/ Salary Start \$ _____ Per _____ Final \$ _____ Per _____	

Salary Requirements

Please indicate your salary expectations for this position: _____

Please list specific salary or range desired. "Open" or "Negotiable" is not a valid response.

Educational Background

	Name	City / State	Dates Attended	Graduate ?	Degree Major
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other				<input type="checkbox"/> Yes <input type="checkbox"/> No	
If you are presently enrolled in school, what are you studying?					
List any special skills, training, or knowledge you have for this position and any other achievements you would like considered.					

REFERENCES

Give name, address and phone number of three non-related friends and/or business references who were not your previous supervisors.

- 1.
- 2.
- 3.

Pastoral Reference: Give name, address, and phone number of a pastor from your church that knows you personally.

APPLICANT'S STATEMENT – READ CAREFULLY

The facts set forth in my application for employment are true and complete. I understand that, if employed, false statements on my application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation on my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice in compliance with applicable laws or statutes.

The receipt of this application does not mean that job openings exist or does not obligate us in any way. I understand that employment at this organization is "at will", and includes no guarantee, contract, or promise of employment for any specified length of time. I further understand that a criminal record check may be conducted on me, and I consent to any such check.

I authorize the use of any information in this application and any attached supplements to verify my statements, and I authorize the past employers, schools, churches, all references, and any other persons or organizations, whether or not identified in this application, to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any and all liability or damages on account of having furnished such information.

Signature of Applicant

Date

NOTE: If this application is returned by mail, please address it to: Administrator, and mark the envelope "Personal and Confidential".

AUTHORIZATION AND RELEASE OF INFORMATION

I authorize Chapel Springs Assembly of God, 11500 New Life Way, Bristow, Virginia, and its agents to contact any references or employers as listed on my application for employment to confirm information that was supplied by me and/or obtain other material information about my employment. I authorize all references and employers to release any information about my qualifications. I also release any references or employers which provides information from any and all liability for providing that information.

Date _____

(Signature)

(Print Name)