



Application for Employment

Faith Lutheran School/Childcare

Date: _____ Position Applying For: _____

Personal Information

Last Name: _____ First Name: _____

Availability? (check all that apply) Days Afternoons Evenings Part-time Full-time

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone Number: _____ Cell Phone Number: _____

Email: _____

Education & Training

Do you have a high school diploma or GED?: Yes No High School: _____

Education/Training beyond high school (college or other school)

School Name & Location	Dates Attended	Credits Earned	Field of Study	Degree Earned

Other training relevant to the position you are applying for (i.e., special training in child development, CPR, first aid):

Employment History (Please list most recent first)

Employer: _____ Position: _____

Address: _____ Telephone: _____

Supervisor: _____

Dates of Employment: _____ Reason for Leaving: _____

Duties: _____

May We Contact? No Yes (Now After Acceptance of Offer)

Employer: _____ Position: _____

Address: _____ Telephone: _____

Supervisor: _____

Dates of Employment: _____ Reason for Leaving: _____

Duties: _____

May We Contact? No Yes (Now After Acceptance of Offer)

Employer:	Position:	
Address:	Telephone:	
	Supervisor:	
Dates of Employment:	Reason for Leaving:	
Duties:		
May We Contact? <input type="checkbox"/> No <input type="checkbox"/> Yes (<input type="checkbox"/> Now <input type="checkbox"/> After Acceptance of Offer)		
Other Information		
What church are you currently attending? _____		
How are you involved there? _____		
Do you have any physical limitations that would prevent you from performing any aspect of the job? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please explain: _____		
Have you ever been convicted of a crime, whether it was a felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please explain: _____		
References (at least 2 must be employment related)		
Name:	Position:	
Company Name:	Phone Number:	
Relationship to you:	Years known:	
Name:	Position:	
Company Name:	Phone Number:	
Relationship to you:	Years known:	
Name:	Position:	
Company Name:	Phone Number:	
Relationship to you:	Years known:	
Do you agree to have references contacted in relation to this application? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Reference checks will be conducted legally in an ethical manner and all information derived will remain confidential.		

By my signature below, I certify that all answers given by me are true, accurate, and complete. I understand that the falsification, misrepresentation, or omission of facts on this application (or any other accompanying or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.

I also understand that if employment is offered and accepted, such employment is not for any specified term and can be terminated at any time, with or without cause and with or without notice, by either Faith Lutheran or me. I further understand that this application is not, and is not intended to be, a contract of employment and that my at--will employment status cannot be changed except by a written document signed by my supervisor.

Faith Lutheran is an equal opportunity employer. We celebrate diversity and are committed to creating an inclusive environment for all employees.

Signature

Date