

Quail Springs Baptist Church

Weekday Ministries

Application for Employment

Date ____/____/____ Position Desired _____
How did you learn of this position? _____
Date you are available to begin working ____/____/____

PERSONAL INFORMATION

Name _____
Last First Middle
Social Security Number ____ - ____ - ____ Birth date ____/____/____
Street Address _____
City _____ State _____ Zip _____
Cell Phone _____ Can you receive texts? _____
E-mail Address _____
Member of what church? _____
Christian: ____ yes ____ no How long a member? _____
Pastor's Name _____
Church Involvement (Specify those with Children) _____

Are you able to support and teach Bible truths and beliefs of Quail Springs Baptist Church? _____

In case of emergency, please notify _____
Relationship _____ Phone _____

EDUCATION

High School _____
Location _____ Graduation Date _____
College or University _____
Location _____ Degrees, Dates Achieved _____
Other _____

Special Courses/Certifications (i.e. CPR, Lifesaving, Sign Language) _____

EMPLOYMENT HISTORY (Please begin with most recent position)

Date: From ____ / ____ / ____ to ____ / ____ / ____
Employer _____ Position _____
Street Address _____ Phone _____
City _____ State _____ Zip _____
Immediate Supervisor _____
Reason for Leaving _____
What work did you perform with children? _____

Date: From ____ / ____ / ____ to ____ / ____ / ____
Employer _____ Position _____
Street Address _____ Phone _____
City _____ State _____ Zip _____
Immediate Supervisor _____
Reason for Leaving _____
What work did you perform with children? _____

Date: From ____ / ____ / ____ to ____ / ____ / ____
Employer _____ Position _____
Street Address _____ Phone _____
City _____ State _____ Zip _____
Immediate Supervisor _____
Reason for Leaving _____
What work did you perform with children? _____

Volunteer Experience (List work you have done with children) _____

Special Talents (List talents or skills in art, music, drama, etc.) _____

Do you have reliable transportation to and from work? _____

CHARACTER REFERENCES (List four, giving name, address, and telephone numbers. The first one is to be your present pastor.)

Name _____
Street Address _____ Phone _____
City _____ State _____ Zip _____
E-mail Address _____
How long known? _____ Pastor of what church? _____

Name _____
Street Address _____ Phone _____
City _____ State _____ Zip _____
E-mail Address _____
How known? _____ For how long? _____
Occupation _____

Name _____
Street Address _____ Phone _____
City _____ State _____ Zip _____
E-mail Address _____
How known? _____ For how long? _____
Occupation _____

Name _____
Street Address _____ Phone _____
City _____ State _____ Zip _____
E-mail Address _____
How known? _____ For how long? _____
Occupation _____

PERSONAL QUESTIONS

During your lifetime, have you ever been accused of molesting or abusing a child, or accused of physical assault or sexual offenses of any nature? _____ yes _____ no
If yes, please explain the nature, of the accusation, charge or conviction. This information will be protected and kept confidential.

As a child or teenager, were you ever molested, abused, assaulted or subjected to a sex offense of any nature? _____ yes _____ no

If you answer yes, an appropriate staff member of the church will discuss this with you in more detail. This information will be protected and kept confidential.

Have you ever been accused of, or arrested for, any crime? _____ yes _____ no

AFFIRMATIVE ACTION SURVEY

Government agencies require periodic reports on the sex, ethnicity, handicapped and veteran status of applicants. This data is for analysis and affirmative action only. Submission of information is voluntary.

Check one: _____ Male _____ Female
Race/Ethnic Group: _____ White _____ Black _____ Hispanic
_____ American Indian/Alaskan Native
_____ Asian/Pacific Islander

Check if any of the following are applicable:
_____ Disabled Veteran
_____ Vietnam Era Veteran
_____ Handicapped Individual

APPLICANT'S STATEMENT

I hereby certify that I have read the above and foregoing application form. My answers are true and correct to the best of my knowledge.

If I am allowed to work with children, I agree to be bound by the Bylaws and policies of Quail Springs Baptist Church and to refrain from unscriptural conduct in the performance of services to the church.

Applicant's Signature

Witness

Today's Date

For Director's and Committee's Use Only

Arranged Interview? _____ yes _____ no

Remarks _____

Interview Report _____

Employed: _____ yes _____ no Date of Employment ____/____/____

Job Title _____ Hourly Rate/Salary _____

Class or Age Group _____

By _____ Date ____/____/____

Supervisor