

Employment Application

1. Name (Last, First, Middle)			
2. I am seeking a permanent position (Circle one) Yes No		3. Position applied for:	
4. Address			
5. Telephone Number(s)		6. Social Security Number	
7. Email Address or Addresses (Optional)			
8. I am legally eligible for employment in the U.S.A. Yes No (If yes, verification will be required)		9. If necessary for the job, I am over (Circle one) 18 19 21 years of age	
10. I am able to perform the essential functions of the position with or without accommodations (Circle one) Yes No			
11. If necessary for the job, I am able to work the following (Circle all that apply – list other restrictions on next line): Weekdays (Days) Weekdays (Evenings) Weekend (Days) Weekend (Evenings) Other Restrictions:			
12. I will be able to work _____ days after being notified that I am hired or on this date: _____.			
13. Education		Yrs. Completed	Field of Study
High School:			Graduate or Degree
College/University:			
Business/Technical:			
Other (may include grammar school)			
14. I have completed first aid training (Circle one) No Yes – Date Completed: _____		15. I have completed CPR training (Circle one) No Yes – Date Completed: _____	
References: Please list three personal references (people who are not related to you by blood or marriage) and provide a complete address and phone information for each. We recommend that you notify references that they will receive a call from a United Methodist Church of Chugiak representative concerning your employment application.			
Reference 1	16. Name		Address
	Telephone		Occupation
	Relationship to Reference		Years Known
Reference 2	17. Name		Address
	Telephone		Occupation
	Relationship to Reference		Years Known
Reference 3	18. Name		Address
	Telephone		Occupation
	Relationship to Reference		Years Known

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19. Have you ever been convicted of or pled guilty or no contest to a crime, either a misdemeanor or a felony (including but not limited to drug-related charges, child abuse, other crimes of violence, theft, or motor vehicle violations)?

No Yes If yes, please explain below:

Previous Work Experience: Please list last employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here, in the summary (following this section), or use an extra sheet of paper if necessary

Employer 1	20. Employer Name	Address
	Position Title, Duties, and Skills	
	Dates Employed From: _____ To: _____	Reason for Leaving
	Supervisor's Name	Supervisor's Telephone
Employer 2	21. Employer Name	Address
	Position Title, Duties, and Skills	
	Dates Employed From: _____ To: _____	Reason for Leaving
	Supervisor's Name	Supervisor's Telephone
Employer 3	22. Employer Name	Address
	Position Title, Duties, and Skills	
	Dates Employed From: _____ To: _____	Reason for Leaving
	Supervisor's Name	Supervisor's Telephone

23. Summarize other employment or volunteer activities related to this job. Include any Professional Licenses, Certifications, or Registrations

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**Authorization, Request, and Release of Liability
for Criminal Records Check**

I, _____, hereby authorize ChoicePoint Service, Inc., a company performing criminal background investigative services, to perform a nationwide criminal background investigation on myself, and to release any information obtained regarding any record of charges and convictions, including but not limited to accusations and convictions for crimes committed against minors, to the United Methodist Church of Chugiak, Staff Parish Relations Committee. I understand that the criminal background investigation will be conducted to the fullest extent permitted by state and federal law. I do release ChoicePoint Services and the United Methodist Church of Chugiak from all liability that may result from any such disclosure made in response to this request.

Signature of Applicant

Date Signed

The following information is required in order to perform the investigation:

Last Name: _____	First Name: _____
Middle Name: _____	Name Suffix: _____
Other Last Name: _____	Other First Name: _____
Social Security Number: _____	
Sex: _____	Date of Birth: _____
Street Address: _____	Apt Number: _____
City: _____	State: _____
Zip Code: _____	Phone Number: _____
Driver's License State: _____	Driver's License Number: _____

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Waiver and Consent

I _____, hereby certify that the information I have provided on this application for employment is true and correct. I authorize the United Methodist Church of Chugiak to verify the information I have provided on this application by contacting the references and employers I have listed, by conducting a nationwide criminal background investigation check, or by other means, including contacting others whom I have not listed. I authorize the references and employers listed on this application to give you whatever information they may have regarding my character and fitness for the job for which I have applied. Furthermore, I waive any rights I may have to confidentiality. I understand that I may make a written request for information derived from the checking of my references.

I understand that I will be required to supply my birth certificate or other proof of authorization to work in the United States and will be fingerprinted as a condition of employment.

In the event that my application is accepted and I become employed by the United Methodist Church of Chugiak, I agree to abide by and be bound by the policies of the United Methodist Church of Chugiak and to refrain from inappropriate conduct in the performance of my duties on behalf of the United Methodist Church of Chugiak.

I understand that the submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by the United Methodist Church of Chugiak, that such employment with the United Methodist Church of Chugiak is at will, for no specified duration, and may be terminated by either the United Methodist Church of Chugiak or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of the United Methodist Church of Chugiak or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of the United Methodist Church of Chugiak except the Staff Parish Relations Committee Chairperson has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the forgoing statements and that any such agreements must be made in writing and signed by the Staff Parish Relations Committee Chairperson.

I understand that if I have misrepresented or omitted any facts on this application, and am subsequently hired, I may be discharged from my job.

I have read this waiver and the entire application, and I am fully aware of its contents. I sign this consent freely and under no duress or coercion.

Signature of Applicant _____
Date

Signature of Witness _____
Date

Once application is completed:

- Fax: 696-2938
- Mail to: PO Box 670909, Chugiak AK 99567
- Deliver in person: 16430 Old Glenn Hwy, Chugiak AK 99567