LifeBridge Christian Church

APPLICATION FOR EMPLOYMENT

"WE ARE AN EQUAL OPPORTUNITY EMPLOYER. WE ARE DEDICATED TO A POLICY OF NON-DISCRIMINATION IN EMPLOYMENT ON ANY BASIS INCLUDING AGE, COLOR, DISABILITY, VIETNAM ERA VETERAN STATUS, NATIONAL ORIGIN, RACE, RELIGION, SEX, OR ANY OTHER STATUS PROTECTED BY LAW."

DATE _____

PERSONAL INFORMATION

Answer each question fully an paper if you do not have enouganswering the following quest upon non-job-related information	igh room on this ap ions, be aware that	plication. PLEAS	SE PRINT, ex	cept for signature	on back of application	n. In reading and		
NAME	LAST							
	LAST	FIRST			MIDDLE			
PRESENT ADDRESSSTREET		СПУ			STATE ZIP			
PHONE NUMBER (<u>)</u>		Last 4 digits SS#.		REFERRED BY				
EMPLOYMENT DESIRED								
POSITION		DATE YOU C	AN START		SALARY DESIRED			
ARE YOU WILLING TO WOR	KOVERTIME?	☐ YES		□NO				
HAVE YOU EVER BEEN DISC INVOLVED IN ANY INCIDENT					REATS, FIGHTING (OR BEING		
HAVE YOU EVER BEEN TER	RMINATED FROM	A JOB OR ASK	ED TO RES	SIGN? YES	NO			
If so, describe each such instar	nce							
ALL FINAL CANDIDATES A AUTHORIZATION FORMS I ARE YOU EMPLOYED NOW? WHOM SHALL WE CONTAC FORMAL EDUCATION AN	<i>WILL BE PROVIDI</i> ? Γ?	ED UNDER SEP. IF YES, MAY WE	ARATE CC	OVER. I YOUR PRESEN	NT EMPLOYER?			
NIAME AND	LOCATION		YEARS	1	CLID IECT	eti inien		
	CHOOL		ATTENDED FROM-TO	LAST GRADE COMPLETED	SUBJECT DEG CERTIF	REE		
PREPARATORY OR HIGH SCHOOL								
COLLEGE								
COLLEGE/ GRADUATE SCHOOL								
MILITARY, TRADE, BUSINESS OR CORRESPONDENCE SCHOOL(S)								
OTHER SUBJECTS OF SPEC	CIAL STUDY OR R	ESEARCH WOF	RK					
U.S. MILITARY RECORD								
BRANCH	D	ATE ENTERED _		DA	TE DISCHARGED_			
HIGHEST RANK			_					

ACCOUNT FOR ALL PERIODS OF TIME, INCLUDING MILITARY SERVICE AND UNEMPLOYMENT. IF SELF-EMPLOYED, GIVE FIRM NAME.

	DATE NAI MONTH AND YEAR	NAME, ADDRESS AND TELEPHONE NUMBER OF EMPLOYER		FINAL SALARY	POSITION	SUPV. NAME	REA	SON FOR LEAVING		
1	FROM									
	то									
2	FROM									
	то									
3	FROM									
	то									
4	FROM									
	то									
	FROM									
5	то									
REFERENCES (LIST BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU OR FORMER EMPLOYERS WHOM YOU HAVE KNOWN AT LEAST ONE YEAR)										
	NAME	TELEPHONE NUMBER	ADDRESS			BUSINESS		YEARS ACQUAINTED		
IN	CASE OF EMERGENCY, NOT	IFY:								
		NAME ADDRESS				RELATIONSHIP TELE		TELEPHONE		
	N 5405 D54D 540U 074751	IENT OARESUUL	/ DEFORE 0101							
	PLEASE READ EACH STATEN				that any false inf	ormation or omissi	ion may <i>i</i>	disqualify me from further		
I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment or for future employment opportunities, and may result in my dismissal if discovered at a later date.										
I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current or past employer, or organization, to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.										
I understand that I may be required to successfully pass a drug screening examination. I hereby consent to a pre-and/or post-employment drug screen as a condition of employment, if required.										
	understand that if I am extended an offer delease of any or all medical information as m						ysical exa	mination. I consent to the		
I UNDERSTAND THAT EMPLOYMENT AT LIFEBRIDGE Christian Church IS ON AN <u>AT-WILL BASIS</u> , MEANING THAT EACH EMPLOYEE IS FREE TO TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, WITH OR WITHOUT REASON, CAUSE OR NOTICE. I ALSO UNDERSTAND THAT NEITHER COMPANY POLICIES, PROCEDURES NOR PRACTICES, NOR AN APPLICATION FOR EMPLOYMENT OR ANY PARTICULAR POSITION, NOR VERBAL STATEMENTS BY MANAGEMENT, NOR SUBSEQUENT EMPLOYMENT CREATES ANY EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT, NOR DOES IT GUARANTEE ANY CONDITION OF EMPLOYMENT OR EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME.										
I have read, understand, and by my signature consent to these statements.										
Signature: Date: Date: This application for employment will remain active only for a limited time. Ask the Human Resource representative for details.										