

APPLICATION FOR EMPLOYMENT

			Date:
		ON:	PERSONAL INFORMATIO
			NAME:
			ADDRESS:
ZIP:	ZII	STATE:	CITY:
CELL PHONE:	CELL PHONE:		HOME PHONE:
			E-mail Address:
			Position(s) Applying For:
PART-TIME	PART-TIME	FULL-TIME	Are you available to work:
		ployment	Date which you can start emp
YES NO	YES NO	in the United States?	Are you legally able to work i
der to adequately check your employment or educationa	der to adequately check y	should be aware of in o	Is there any other name we s history? If so, please list.
ZIP:	ZII CELL PHONE: PART-TIME YES NO	FULL-TIME iployment in the United States?	CITY: HOME PHONE: E-mail Address: Position(s) Applying For: Are you available to work: Date which you can start emply are you legally able to work in the start emply are you legally able to work in the start emply are you legally able to work in the start emply are you legally able to work in the start emply are you legally able to work in the start emply are you legally able to work in the start employer.



Have you applied with Thanksgiving Church before?	YES	NO				
If so, when was the application made and for what position:						
Have you ever been employed with Thanksgiving Church be	efore? YES	NO				
If yes, please indicate the department you worked for	or the dates of empl	oyment.				
Have you ever been convicted of a Felony? YES	NO	<u> </u>				
*Note: A conviction record will not necessarily disqualify an ap will be considered in relation to the nature and duties of	-	ces of the conviction				
Do you have any relative already employed by Thanksgiving	g Church? YES	NO				
If yes, please state name and relationship.						
Have you had training/coursework or experience in: (Please	check those that ap	ply)				
Typing	Data Entry					
PC/Computer Terminal	Calculator/Addi	ng Machine				
Dictation Equipment	Bookkeeping					
Word Processing						
Please list any qualifications which you feel are applicable to equipment or business machines you can operate and any						
equipment of business machines you can operate and any p	ororessional licenses	and certifications.				



EDUCATION AND PREVIOUS EXPERIENCE: Highest year of school attended: 9 10 11 12 Highest degree attained: JR. HI GED HS AA BA MA PHD Please list any other Professional Degrees or Certificates: Name of High School and Location: Please list any other school(s) and their location(s): Other Formal Training: Do you plan continued study? YES NO	reasonable accommodation	on?			-	·			
Highest year of school attended: 9 10 11 12 Highest degree attained: JR. HI GED HS AA BA MA PHD Please list any other Professional Degrees or Certificates: Name of High School and Location: Please list any other school(s) and their location(s): Other Formal Training:	YES	NO							
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Other Formal Training:	Name of High School and	Location:							
Other Formal Training:	Please list any other school	ol(s) and t	their loca	ation(s):					
Other Formal Training:									
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	Other Formal Training:								
Do you plan continued study? VES NO									
Do you plan continued study? VES NO									
Do you plan continued study? VES NO									
DO VOU DIAN CONUNIEU SUUOV! TES NO	Do you plan continued stu	ıdv?		YES			NO		
If yes, when?		-				_			

Are you able to perform the essential functions of the job for which you are applying with or without a



EMPLOYMENT HISTORY:

Instructions: Begin with the most RECENT position and include military service and volunteer work where applicable. Do not include names or organizations, clubs, professional societies, or other associations which, by their name or character, indicate the race, color, sex, age, national origin, or presence of a disability of its membership.

(1) Employer:		
Address:	Phone #:	
Dates Employed:		
Position Held:		
Supervisor:		
Description of Duties (explain fully):		
Reason for leaving:		
Your ending salary:	May we contact this employer: YES	NO
(2) Employer:		
Address:	Phone #:	
Dates Employed:		
Position Held:		
Supervisor:		
Description of Duties (explain fully):		
Your ending salary:	May we contact this employer: YES	NO



(3) Employer:						
Address:				Phone #:		
Dates Employed:						
Position Held:						
Supervisor:						
Description of Duties	(explain fu	lly):				
Reason for leaving: _						
Your ending salary: _			May we contact	this employer:	YES	NO
MILITARY SERVICE:						
Have you served or a	re currently	serving in the	Armed Forces of the	Jnited States:		
	YES	NO				
If yes, please i	ndicate the	e branch, date s	served and ending ran	k:		



REFERENCES:

Please list three references other than relatives or former qualifications:	employers who are well acquainted with your
Name:	
Address:	
Phone Number:	_Years Known:
Name:	
Address:	
Phone Number:	
Name:	
Address:	
Phone Number:	_Years Known:
I certify that the information contained in this application understand that falsification of this information is grounds. I understand that my employment can be terminated, with any time at the option of either Thanksgiving Church or memployment physicals (which may include a drug screen), depending upon the position being applied for. I authorize Thanksgiving Church to make such investigation	for refusal to hire, or if hired, dismissal. h or without cause, and with or without notice, at yself. Thanksgiving Church may conduct prepsychological exams and background investigations
employment history as may be necessary in arriving at an release any information requested by any of my prospecti to give me written notice of such disclosure. I hereby rele employer, schools, and persons from all liability in respond	employment decision. I also authorize the Church to ve or subsequent employers without any obligation ase the Church, former/prospective/subsequent
Signature:	
Date:	