



Application for Employment

Applicant Name _____ Social Security No _____ / _____ / _____

Street Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Position(s) applying for _____

Date you can start _____ Salary Desired \$ _____ Ever Applied here before? Yes or No

Have friends or relatives working at the Mission? Yes or No If yes, who & relationship _____

Can you work on weekends? Yes or No Do you have transportation to/from work? Yes or No

If hired, are you willing to submit to and pass a controlled substance test? Yes or No

Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes or No If yes, please describe the crime - state nature of crime(s), when and where convicted and disposition of the case.

(No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date, nature, any significant details and the surrounding circumstances and the relevance of the offense to the position applied for may, however, be considered.)

Education History

High School _____ How many years completed? _____ Graduate? _____

College _____ How many years completed? _____ Graduate? _____

Other _____ How many years completed? _____ Graduate? _____

Military Service _____ Years and Rank _____

Special Work Experience or Extra Training/Skills _____

Additional Information

Do you speak, write or understand any foreign languages? Yes or No

If yes, describe which language(s) and how fluent of a speaker you consider yourself to be.

Any other experience, training, qualifications, or skills which you feel should be brought to our attention?

Employment History

Are you employed now? Yes or No If yes, may we inquire of your present employer? Yes or No

May we contact the employers below for references? Yes or No

(List last 4 employers starting with the most recent)

Month & Year	Name and City of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				

References

(Give the names of three people not related to you, who we may contact.)

Name	City	Phone Number	Years Acquainted

Please read and initial each paragraph, then sign below

I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, falsified statements on this application shall be grounds for dismissal.

_____ (initial)

I understand that if I am employed, my employment is not definite and can be terminated at any time either with or without prior notice, and by either me or St. Andrews Mission within the first six months.

_____ (initial)

I permit the company to examine my references, record of employment, education record, and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers & all other persons, corporations, partnerships & associations from any & all claims, demands, or liabilities arising out of or in any way related to such examination or revelation.

_____ (initial)

Applicant's Signature _____ **Date** _____