

**REJOICE LUTHERAN CHURCH
P.O BOX
307 CLEARWATER, MN 55320-0307
(320) 558-6851**

Employment Application

Applicant Information

Name _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Contact Information:

Cell Phone: _____ Other: _____ Email: _____

Position Applied for: _____

I am interested in: Full-Time Part-Time Volunteer Internship Days Nights

When will you be available for employment? _____

Immediately Beginning _____ Upon _____ weeks notice to employer

Are you over 18 years of age? YES NO

Have you ever been convicted of a felony within the last 7 years? YES NO
(conviction will not necessarily disqualify from employment)

Have you been employed by Rejoice Lutheran Church before? YES NO

In your opinion, what are your qualifications for this position? _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that the above information is true and complete to the best of my knowledge and I authorize you to make a review of my qualifications and abilities. I understand that misrepresentation or omission of fact called for may be cause for dismissal whenever discovered. I also understand that in carrying out this review, reports may be solicited from previous employers, schools, personal references and other references, but no attempt will be made to contact my present employer unless I have given permission to do so.

Signature: _____ Date: _____