

Employment Application (Non-Professional)

Date:/		
Name:		
First	Middle	Last
Home Phone:	Work Phone:_	
May we contact you at work	x? YES / NO	
Address:		
Position(s) Applied For:		
Have you previously submi	tted an application to CLCS? YE	ES / NO
If yes, date submitted:/	_/	
Have you previously been e	employed at CLCS? YES / NO	
If yes, date employed:/	_/ Position Held:	
Are you legally eligible for	employment in this country? Y	ES / NO
Date available for employm	nent:	
Type of employment desire	ed: Full-Time / Part-Time / Ter	nporary / Seasonal
Will you work overtime, if i	required? YES / NO	
If no, please explain:		
Have you ever been bonded	1? YES / NO	
Have you been convicted of	f a crime in the last 7 years? YE	S / NO
If yes, please explain:		

^{*}Conviction will not necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.

Educational History

Last 3 schools attended,	starting with most recent:	
School:		
Years Completed:	Degree/Diploma:	GPA/Class Rank:
Major:	Minor:_	
School:		
Years Completed:	Degree/Diploma:	GPA/Class Rank:
Major:	Minor:_	
School:		
Years Completed:	Degree/Diploma:	GPA/Class Rank:
Major:	Minor:_	
Professional Referen	<u>nces</u>	
List 3 professional refer	ences who are <u>not</u> related t	o you:
Name:	Phone:_	
Relationship:		Years Known:
Name:	Phone:_	
Relationship:		Years Known:
Name:	Phone:_	
Relationship:		Years Known:

Employment History

Last 3 jobs, starting with most recent:

Employer:	Supervisor:	
Address:	Phone:	
Job Responsibilities:		
	Ending Date:/	
Reason for leaving:		
Employarı	Supervisor:	
Employer:	Supervisor:	
Address:	Phone:	
Job Responsibilities:		
Starting Date://	Ending Date:/	
Reason for leaving:		
Employer:	Supervisor:	
Address:	Phone:	
Job Responsibilities:		
Starting Date://	Ending Date:/	
Reason for leaving:		

Additional Information

List professional, trade, business, or	r civic associations and any offices held:
Organization:	Position Held:
Organization:	Position Held:
Organization:	Position Held:
*Please exclude memberships that woul or any other similarly protected status.	ld reveal sex, race, religion, national origin, age, color, disability,
List special accomplishments, public	cations, awards, etc:
*Please exclude information that would or any other similarly protected status.	reveal sex, race, religion, national origin, age, color, disability,
List any additional information you	would like us to consider:

^{*}Please attach your current typed résumé.

Church:	Active Member? YES / NO				
Please list your major	Please list your major church activities/areas of involvement:				
Statement of Faith: Ple which you agree with it.	ase carefully read and indicate below with your signature the degree to				
We Believe:					
In the inspiration	on of the Holy Scriptures.				
In the Trinity: F	ather, Son, and Holy Spirit.				
In the deity of o	ur Lord, Jesus Christ, and his virgin birth.				
In the forgivene	ess of sin only by the blood of Jesus.				
In salvation by	grace through faith.				
In divine healin	g.				
In the infilling o	f the Holy Spirit.				
In the return of	Jesus Christ.				
In the fellowshi	pping with all denominations of the Christian faith.				
I fully support the abo	ve Statement of Faith, as written without mental reservations.				
Signature:	Date:				
	atement of Faith except for the area(s) listed and explained below. The either disagreements or items for which I have not yet formed an option				
Signature	Date				

PLEASE ATTACH: A typed document with your personal testimony. Also, please explain how your personal relationship with Jesus Christ will benefit you in your duties at CLCS, and how your Christian character will benefit the students and coworkers around you.

Employment Agreement

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, and educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, fathering and using such information and all persons, corporations or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature:	Date:/_	/	′
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