

APPLICATION FOR EMPLOYMENT

Position Applying For:		Date Available:	
Full or Part Time:		Desired Salary:	
Personal Information			
Name:	<i>Last</i>	<i>First</i>	<i>Middle</i>
Address:	<i>Street</i>	<i>City</i>	<i>State</i> <i>Zip</i>
Home Phone:		Alternate Phone:	
Are you 18 years or older?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If no, please state age:
Do you have any medical condition(s) that may interfere with fulfilling the responsibilities of the position for which you are applying? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, please explain:			
Have you ever been convicted of a felony, barrier crime, or were subject of a founded Child Protective Service complaint? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, please explain:			
Employment requires Criminal Background Clearances. Is this acceptable to you? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Do you agree to abide by the non-smoking policy which prohibits any smoking on the premises or otherwise during work hours? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Do you use illegal drugs? Yes <input type="checkbox"/> No <input type="checkbox"/>			
This school is a ministry of St. John's Lutheran Church. We teach weekly chapel lessons and teach the children the word of God as part of our curriculum. Are you comfortable teaching the Christian part of the curriculum? Yes <input type="checkbox"/> No <input type="checkbox"/>			
In case of emergency, please notify:			
Address (City, State, Zip)			
Phone:		Relationship:	
DISCLOSURE: Before driving a vehicle to transport children, I realize that I am required to disclose any moving traffic violation that occurred five years prior to or during employment or assignment as a driver.			
Signature		Date	

Education and Training	
1. Name and location of high school: _____ Dates attended: _____ Date of graduation or GED: _____	
2. Name and location of College/University: _____ Dates attended: _____ Number of years completed: _____ Degree(s) earned: _____	
3. Additional training or certification that would be helpful in evaluating your application: 	
Experience	
Begin with the current or most recent employment (including military experience). Use additional paper if necessary or attach resume.	
1. Position:	Dates: From _____ To _____
Employer:	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
Address:	Job duties:
Phone:	Immediate Supervisor:
Reason for leaving:	Are you eligible for rehire? Yes <input type="checkbox"/> No <input type="checkbox"/>
Salary: From _____ to _____	May we contact your employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Position:	Dates: From _____ To _____
Employer:	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
Address:	Job duties:
Phone:	Immediate Supervisor:
Reason for leaving:	Are you eligible for rehire? Yes <input type="checkbox"/> No <input type="checkbox"/>
Salary: From _____ to _____	May we contact your employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Position:	Dates: From _____ To _____
Employer:	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
Address:	Job duties:
Phone:	Immediate Supervisor:
Reason for leaving:	Are you eligible for rehire? Yes <input type="checkbox"/> No <input type="checkbox"/>
Salary: From _____ to _____	May we contact your employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
Please describe any volunteer work, youth ministry, or any other experience related to child care: 	

References		
1. Name:	Title:	Relationship:
Company:	Phone: (W) _____ (C) _____	
Address:		
2. Name:	Title:	Relationship:
Company:	Phone: (W) _____ (C) _____	
Address:		
3. Name:	Title:	Relationship:
Company:	Phone: (W) _____ (C) _____	
Address:		
Why do you want to work at St. John's Lutheran ECEC?		

Applicant's Statement:

I authorize any references listed in this application to give you any information that they may have regarding my character and fitness for child care/youth work. I further authorize St. John's Lutheran ECEC to utilize the information contained in this application to conduct a reasonable investigation of my background, suitability, and fitness for child care/youth work at St. John's Lutheran ECEC.

I hereby release the references provided herein and St. John's Lutheran ECEC from liability for any damage that may result from furnishing such evaluations to St. John's Lutheran ECEC. I waive any right that I have to inspect the references provided on my behalf.

Should my application be accepted, I agree to be bound by the Statement of Faith, Code of Discipline, religious tenets, Constitution, Bylaws, and all written policies of St. John's Lutheran ECEC. I agree to refrain from unscriptural conduct in the performance of my services to or for the benefit of St. John's Lutheran ECEC.

I understand that I will be dismissed if I have been named as a perpetrator of a founded report of child abuse within the past five years. I understand that my employment may be terminated if I have been named as the perpetrator of a founded report of child abuse longer than five years ago or the perpetrator of an indicated report of child abuse.

I understand that I will be required to submit written information to demonstrate that I possess the education, orientation training, staff development, certification, and experience required by the job position. I hereby affirm/swear that the information set forth is true and correct to the best of my knowledge.

Signature	Date
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