



EMPLOYMENT APPLICATION FORM

(If available, please attach your resume and any letters of reference)

Last Name: _____ First: _____ Middle: _____
Address: _____
City: _____ State: _____ Zip: _____
Primary Phone: _____ [] Cell [] Home Other Phone: _____ [] Cell [] Home
Social security number: _____ DOB: _____

U.S. Citizen? [] Yes [] No Do you have a current driver's license? [] Yes [] No D/L State: _____
U.S. Military Branch? _____ Rank: _____ Dates From/To: _____
Are you currently a church member? [] Yes [] No If yes, where? _____ How long? _____

Position for which you are applying? _____
For positions other than office staff: _____
Are you able to perform basic physical functions of this position without reasonable accommodations? [] Yes [] No
When are you available to start? _____
Availability: [] Full-time [] Part-time [] Temporary [] On-call/as needed [] Temp to Perm

EDUCATION

High school/GED: _____ Diploma received: [] Yes [] No
College: _____ Degree received: _____ Date: _____
Post-grad / other training: _____ Degree received: _____ Date: _____

EMPLOYMENT

Present employer: _____ Start date: _____
Type of business: _____ Phone: _____ Supervisor's Name: _____
Your title: _____ Starting salary: _____ Current salary: _____
Brief job description/responsibilities: _____
Why are you seeking a new position: _____
What do you like/dislike about your current job? _____

Previous employment: _____ Dates From/To: _____
Type of business: _____ Phone: _____ Supervisor's Name: _____
Your Title: _____ Starting salary: _____ Ending salary: _____
Reason for leaving? _____
Brief Job description/responsibilities: _____
What did you like/dislike about this job? _____

MINISTRY WORK 1

Type of ministry: _____ Dates From/To: _____
Type of work: _____ Your Title: _____
Supervisor's name: _____ Phone: _____
Brief Job description/responsibilities: _____

MINISTRY WORK 2

Type of ministry: _____ Dates From/To: _____
Type of work: _____ Your Title: _____
Supervisor's name: _____ Phone: _____
Brief Job description/responsibilities: _____

OTHER WORK (VOLUNTEER/INTERNSHIP):

Type of work/Title: _____ Dates From/To: _____
Supervisor's name: _____ Phone: _____
Brief Job description/responsibilities: _____

SKILLS & GIFTS

Please list your skills and gifts that you believe may be pertinent or helpful to this position.

REFERENCES

Professional:

Name: _____ Company/Title: _____ Phone: _____
Name: _____ Company/Title: _____ Phone: _____
Name: _____ Company/Title: _____ Phone: _____

Personal:

Name: _____ Company/Title: _____ Phone: _____
Name: _____ Company/Title: _____ Phone: _____
Name: _____ Company/Title: _____ Phone: _____

- May the church check with your past employers about your job performance? Yes No
- May the church call or write your references and ask for information? Yes No
- May the church check with the department of motor vehicles about your driving record? Yes No
- May the church obtain an interstate criminal records check or other background records and information check on you? Yes No
- May the church verify all items of information you have given on this form? Yes No
- May the church check with any other persons or any other sources of information it may consider relevant to hiring you? Yes No

Applicant's Signature: _____ Date: _____

DISCLOSURE:

PPC is committed to equal employment opportunity for all qualified persons, without regard to race, color, ancestry, national origin, sex, marital status, physical disability, mental disability, medical condition, veteran's status, age, or any other applicable protected class so determined by state or local statute or code, to the extent required by law. This applies to all employment practices, including hiring, promotions, training, disciplinary action, termination, and benefit.

The Church does, however, reserve the right to employ persons who have a denominational background and philosophy of ministry similar to ours and who, in the opinion of the Church, have a work history and a life style that is consistent with the Scriptural principles of the Church. The Session shall make the final decisions concerning noncompliance with these conditions.

OFFICE USE:
Initial Interview: Day: _____ Date: _____ Time: _____
Session Review: Day: _____ Date: _____ Time: _____
Hired: Yes No Comments: _____

Sr. Pastor's Signature: _____ Session Member's Signature: _____