KIMBALL MEMORIAL LUTHERAN CHURCH

Employment Application



APPLICANT INFORMATION																				
Last Name					First						M.I.		Date	2						
Street Address												Apartment/Unit #								
City								State					ZIP							
Phone								E-mail Address												
Position Applied For:						Date A			e Ava	Available:										
						NO 🗌 If no,			o, ar	are you authorized to w				he U.S	.? '	YES		NO		
Have you ever worked for this company?						NO 🗌 If so,			o, wł	when?										
Have you ever been convicted of a felony? YES					N	0 🗆	If y	If yes, explain												
Social Security No.						С	Driver License State & Number:													
EDUCATION- PLEASE ATTACH ANY CREDITALS TO THIS PAGE																				
High Scho	School					Α	ddress													
From		То		Did you	ou graduate?		ES 🗌	NO		De	gree									
College							Α	ddress												
From			То		Did you	Did you graduate?		ES 🗌	NO 🗆 De			gree								
Other						Α	ddress													
From			To Did you g		graduate?	YES 🗆		NO		De	gree									
PROFESSIONAL CERTIFICATIONS AND MEMBERSHIPS																				
REFERE Please lis			foccio	anal refer	ancec															
Full Name		υ ριυ	1 63310	inai reiero	crices.						Relatio	nchin								
											hone	Janip								
Company										r	Tione									
Address																				
Full Name								Relationship												
Company	'								Phone											
Address													1							
Full Name									Relationship											
Company									F	hone										
Address	ss																			

PREVIOUS OR CURRENT EMPLOYMENT											
Company			Phone								
Address			Supervisor								
Job Title			Starting Salary	\$	Ending Salary \$						
Responsibilities											
From	То	Reason for Leaving									
May we contact you	ur previous super										
Company			Phone								
Address			Supervisor								
Job Title			Starting Salary	\$	Ending Salary \$						
Responsibilities											
From	То	Reason for Leaving	Reason for Leaving								
May we contact your previous supervisor for a reference? YES NO											
		ND SIGNATURE									
		d complete to the be	,								
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.											
I hereby authorize Kimball Memorial Lutheran Church to make an independent investigation of my background, references, character, past employment, education, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment. I authorize any references or churches listed in this application to give Kimball Memorial Lutheran Church any information (including opinions) that they may have regarding my character and fitness for working with children or youth. In consideration of the receipt and evaluation of this application by Kimball Memorial Lutheran Church, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application. Should my application be accepted, I agree to be bound by the Constitution, Bylaws and policies of Kimball Memorial Lutheran Church and											
to refrain from inappropriate conduct in the performance of my services on behalf of the church.											
I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement which I have read and understand.											

Signature

Date