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Employment Date	Department					
Position Title	Payroll Status: Salary Hourly					

First Name	Middle Name	Last Name		
Current Address		City	State	Zip Code
Home Phone	Business Phone		Cell Phone	
May we call at your business number?	Y N If not, how	v can we reach you?		

Employment History

List chronologically, with present or most recent employer first.

t es To	Position	Sal Start	ary End	Immediate Supervisor	Reason for leaving
		Docition	Dogition	Position	Position

P	ersonal and Employment Information	•	Are yo
•	Are you a member of Church on the Rock? OY N	•	If yes,

- Are you currently authorized to work in the U.S.? \(\circ\) Y \(\circ\) N If your work authorization is based upon a nonimmigrant • visa (e.g. F-1, G-1, H-1) please list your visa classification:
- Briefly describe your salvation experience with Jesus Christ:
- What type of work are you applying for?

- ou related to anyone on staff? 🔘 Y 🔘 N
- If yes, please list employee name.
- Describe your computer and technical skills: List other skills, language ability, or special qualifications:

Name and Locatior	of School	Type of Diploma Certificate or Degree	Graduation Date	Major/Minor
List extracurric	ular activities and			-
honors (social,	scholastic, athletic):			
lilitary Record	. (U.S. Armed Forces O	nly)		
ervice and Branch		Primary Fi	unction	
Entered eferences astomarily we will c	Discharged heck employment refe	Final Rank/Rate	Active Reserve O	bligation Employment History section.
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In making this application for employment with Church on the Rock Church, I affirm that all information is true and complete and I grant permission for the Church to contact all references, schools, and former employers, and make inquires regarding my character, personal attributes and general reputation. I understand that any misrepresentation in this application will be sufficient cause for rejection of this application or my dismissal after employment. I understand that an investigative report may be made which might include information concerning my character, general reputation and personal characteristics, and that I can make a written request of the consumer reporting agency for additional information as to the nature and scope of the report if one is made.

Signature		Date	
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