

# Application for Employment

Instructions: Complete all necessary information. You may be asked to provide additional information on another form. This application will be kept of file. It is to your advantage to periodically check to keep it current and active. Be sure to sign and date the application. **Please print.**

Name \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Position Applied for \_\_\_\_\_ Shift preferred: Daytime  Evening  Any

How did you hear about us? TWC  WTAMU on-line ad  AC on-line ad

Friend  Other  \_\_\_\_\_

Special training or skills: (languages, machine operations, etc.) that would benefit you in the job for which you are applying: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you accept full-time work? Yes  No  Would you accept part-time work Yes  No

On what date would you be available for work? \_\_\_\_\_

Have you ever been employed here before? Yes  No  If yes, dates \_\_\_\_\_

Do you have a legal right to be employed in the U.S? Yes  No  (If yes, proof is required.)

Are you of legal age to work? Yes  No

## Educational Background

High School:

Name and location: \_\_\_\_\_

Did you graduate? Yes  No  GED

College:

Name and location: \_\_\_\_\_

Course of Study \_\_\_\_\_ Did you graduate? Yes  No

Degree or diploma \_\_\_\_\_

Vocational or other training:

Name and location: \_\_\_\_\_

Course of Study \_\_\_\_\_ Did you graduate? Yes  No

Degree or diploma \_\_\_\_\_

## **Previous Employers & Addresses**

Place an X by the employer(s) you do not want us to contact. List the most recent employer first.

1. Company Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

Position \_\_\_\_\_ Last Wage \_\_\_\_\_

Reason for leaving \_\_\_\_\_

2. Company Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

Position \_\_\_\_\_ Last Wage \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Have you ever been indicted or convicted of a felony?  No  Yes

I have seen a copy of the job duties for this position and I agree that I can physically and mentally perform the essential functions of this job with or without reasonable accommodation.

No  Yes

### **APPLICANT'S ACKNOWLEDGMENT**

#### **PLEASE READ VERY CAREFULLY**

I understand that in making this application for employment a background check may be prepared whereby information is obtained through personal interviews with my neighbors, friends, or other acquaintances. Such an inquiry would include information as to character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation.

I authorize you to communicate with persons listed as references, former employers, and any others with whom you desire to check. I agree to hold such persons harmless with respect to any information they may give about me.

I understand that completion of this Application for Employment does not guarantee that I have been employed by this Church. I understand that all job offers may be conditional upon satisfactory completion of a background check, reference check, criminal history check and drug screen. I hereby consent to all of these tests and checks. I further

understand that final approval of any job offer is made by the Church after completion of these tests and that until such final approval is made, I do not have a firm job offer to work as an employee of the Church.

I understand that all employees are employed at the will of the Church for an indefinite period and are subject to termination at any time, for any lawful reason, with or without cause or notice. At the same time, I understand that I may terminate my employment at any time and for any reason. I understand that no representative of the Church, other than the Session, has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I understand that within 3 days of starting employment with the Church, I will have to provide valid documents that verify my identity and my eligibility to legally work in the United States. If I do not provide such documentation by the third day of employment, I understand that my employment will be terminated.

In consideration of my employment, if I am employed, I agree to conform to the ethics and employment policies of the Church. If employed, I agree to engage in no outside activity which would involve a material conflict of interest with, or which could reflect adversely on the Church. I understand the decision of a conflict of interest is to rest with the Church.

I understand that there may be a probationary period of employment if I am hired by the Church. I acknowledge that completion of an introductory period or conferral of regular status does not change my status as an employee-at-will or in any way restrict the Church's right to terminate me or change the terms or conditions of employment.

I understand that any misrepresentation, deception, or false statement made in this Employment Application may result in my not being considered for employment, and if not discovered by the Church until after my becoming employed, is grounds for, and may result in, my immediate termination.

**By signing this, I certify that I have read, understood and agreed to the conditions outlined in this applicant's statement and that every piece of information I have provided on this application is true and correct to the best of my knowledge. I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably.**

APPLICANT'S SIGNATURE: \_\_\_\_\_

Date: \_\_\_\_\_