



Bethel
Church

702 W. Alcott Ave.
Fergus Falls, MN 56537
(218) 736-5654

_____ (position I am applying for)

APPLICANT INFORMATION					
Last Name		First		M.I.	Date of Birth / /
Street Address					Apartment/Unit #
City		State		ZIP	
Cell Phone			E-mail		
Best way to contact you	Phone <input type="checkbox"/> Email <input type="checkbox"/>				
Have you worked at Bethel Church before?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you currently employed?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Seminary/ Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

LATEST EMPLOYMENT					
Organization's Name			Phone	()	
Address			Supervisor		
Position Title			Starting Salary	\$	Current Salary \$
Responsibilities					
From	To	Reason for Leaving			
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			

PREVIOUS EMPLOYMENT					
Organization's Name			Phone	()	
Address			Supervisor		
Position Title					
Responsibilities					
From	To	Reason for Leaving			
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			

PREVIOUS EMPLOYMENT CONTINUED				
Organization's Name			Phone	()
Address			Supervisor	
Position Title				
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>

COMPENSATION REQUIREMENTS & BACKGROUND CHECK		
Do you have any compensation requirements?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If answered yes to previous question, please list here:		
May we do a criminal background check on you? (You may be asked for your Social Security Number)	YES <input type="checkbox"/>	NO <input type="checkbox"/>

REFERENCES			
<i>Please list two professional references and one personal reference.</i>			
Full Name		Relationship	
Company		Phone	()
Address			
Full Name		Relationship	
Company		Phone	()
Address			
Full Name		Relationship	
Company		Phone	()
Address			

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, a complete resume may be required.	
I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date