CITYRISEApplication for Employment



Name:			Date:		
Address:					
City:	State:	Zip Code:	Ph Number: ()	
Position desir	red:				
are applying? If no, please	PYES □ NO □ explain. (If you ha	ave any question a	ribed in the job descript s to what functions are er before you answer th	applicable to the	•
When are you	u available to beg	in work?			
		mployed in the Un will be required up	ited States? YES □ NO oon employment)		
aside in a crir		er than a minor trat	eived deferred adjudicat fic offense? YES □ No		viction set
Have you eve If yes, please		d from employmer	nt or asked to resign by	an employer?	
		ars? YES □ NO □ provide authorizati			
If yes, what d	epartment?	Rise before? YES	□ NO □ When? (Give date	s)	
	any relatives or find where do they		or CityRise? YES 🖵 NO		
Please explai	in your faith in Je	sus:			

•		rk: DAYS □ N me, please ex		WEEKENDS	☐ FULL TIM	E 🗖	
Days & Hour	s Available	e:(If employed, r	otification	must be provid	ed in writing sh	ould availabilit	y change.)
Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From:							
То:							
If yes, may w	e contact y	oyed? YES ☐ your employer why are you co	? YES □				
which you ar	e applying	rofessional, tra ? YES □ NO t nd list offices h]	ess or civic or	ganizations tl	hat deal with	the position fo
EDUCATION							
EDUCATION		Name and Location of School		Course of Study		Diploma or Degree or Certificate Received	
High School							
College or University							
Vocational o Trade Schoo	I						
Graduate Work							
Have you ev If yes, descri		y volunteer wo	ork? YES	□ NO □			

EMPLOYMENT

Start with your current or most recent position, include the most recent 10 years **Skip this section if this information is included in your resume.**

Name of Employer		Telephone Number		
Full Address (Including	Street, City, State & Zip)	Supervisor's Name and Title		
Dates Employed	From Month/Day/Year	To Month/Day/Year		
Job Title				
Name of Employer		Telephone Number		
Full Address (Including	Street, City, State & Zip)	Supervisor's Name and Title		
Dates Employed	From Month/Day/Year	To Month/Day/Year		
Job Title				
Name of Employer		Telephone Number		
Full Address (Including	Street, City, State & Zip)	Supervisor's Name and Title		
Dates Employed	From Month/Day/Year	To Month/Day/Year		
Job Title	1	· · · · · · · · · · · · · · · · · · ·		

Use an additional sheet of paper if more space is necessary.

PERSONAL REFERENCES

Give three references (not relatives)

Name:	Occupation:
Phone number:	Full Address: StreetStateZip
Name:	Occupation:
Phone number:	Full Address: Street CityStateZip
Name:	Occupation:
Phone number:	Full Address: Street CityStateZip

We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

BY SIGNING THIS APPLICATION, I AGREE:

This application is complete and accurate to the best of my knowledge. I have not made any attempt to conceal information. I understand that any falsification of information given by me in connection with my application can result in disqualification for employment consideration or, if hired, may be grounds for termination. I authorize West University Baptist Church (dba CityRise) or its agents to make inquiries and request information concerning my previous employment, educational history and to conduct such background checks as determined to be necessary in its sole discretion. I understand that if I am hired, additional background checks may occur, as reflected in the CityRise Employee handbook and as determined to be necessary by CityRise. I also understand that if I am hired, my employment is at will and for no definite time and may be terminated at any time without prior notice.

Signed:	Date:
•	