

# NEWARK UNITED METHODIST CHURCH

## Application for Employment

Instructions: Print *clearly* in black or blue ink. Answer all questions. Sign and date the form.

Submit a letter of interest, your resume and the completed application via mail or in person to:

Newark United Methodist Church  
ATTN: SPRC Chair  
69 E. Main St.  
Newark, DE 19711

### **Personal Information**

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Home Phone Number: (\_\_\_\_) \_\_\_\_\_

Cell Phone Number: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Have you ever applied to work, or volunteer, for the church before? [ ] Y or [ ] N

If yes, please explain (include date): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any friends, relatives, or acquaintances working, volunteering, or attending services at the church? [ ] Y or [ ] N

If yes, state name & relationship: \_\_\_\_\_

\_\_\_\_\_

If hired, would you have transportation to/from work? [ ] Y or [ ] N

Are you over the age of 18? [ ] Y or [ ] N

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States? [ ] Y or [ ] N

Have you been convicted of or pleaded no contest to a felony within the last five years? [ ] Y or [ ] N

If yes, please describe the crime - state nature of the crime(s), when and where convicted and disposition of the case: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are you willing to authorize a criminal background check?  Y or  N  
If hired, are you willing to submit to and pass a controlled substance test?  Y or  N

### **Position and Availability**

Position Applied For: \_\_\_\_\_

#### **Are you applying for:**

- Temporary work – such as summer or holiday work?  Y or  N
- Regular part-time work?  Y or  N
- Regular full-time work?  Y or  N

#### **Days/Hours Available:**

Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_  
Saturday \_\_\_\_\_  
Sunday \_\_\_\_\_

Hours Available: From \_\_\_\_\_ to \_\_\_\_\_

If applying for temporary work, when will you be available? \_\_\_\_\_

If hired, on what date can you start working? \_\_\_ / \_\_\_ / \_\_\_

Can you work on the weekends?  Y or  N

Can you work evenings?  Y or  N

Are you available to work overtime?  Y or  N

Are you able to perform the essential functions of the job for which you are applying, either with/without reasonable accommodation?  Y or  N

If no, describe the functions that cannot be performed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **Education, Training and Experience**

### **High School**

School name: \_\_\_\_\_

School address: \_\_\_\_\_

School City, State, Zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

Degree / diploma earned: \_\_\_\_\_

### **College / University:**

School name: \_\_\_\_\_

School address: \_\_\_\_\_

School City, State, Zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

Degree / diploma earned: \_\_\_\_\_

### **Vocational School:**

School name: \_\_\_\_\_

School address: \_\_\_\_\_

School City, State, Zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

Degree / diploma earned: \_\_\_\_\_

### **Military:**

Branch: \_\_\_\_\_

Rank in Military: \_\_\_\_\_

Total Years of Service: \_\_\_\_\_

Skills/duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Related details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Skills and Qualifications: Licenses, Skills, Training, Awards**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you speak, write or understand any foreign languages? [ ] Y or [ ] N

If yes, describe which languages(s) and how fluent of a speaker you consider yourself to be: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Employment History**

You should be prepared to detail each position for the past five years, and account for any gaps in employment during that period.

Are you currently employed? [ ] Y or [ ] N

If you are currently employed, may we contact your current employer? [ ] Y or [ ] N

Name of Employer: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Business Type: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position & Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**Previous Positions:**

Include for each employer/position for the past five years beginning with the most recent:

Name of Employer: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Business Type: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position & Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for references?  Y or  N

Name of Employer: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Business Type: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position & Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for references?  Y or  N

Name of Employer: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Business Type: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Length of Employment (Include Dates): \_\_\_\_\_  
Position & Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
May we contact this employer for references? [ ] Y or [ ] N

### **References**

List below three persons who have knowledge of your work performance within the last four years. Please include professional references only.

Name - First, Last: \_\_\_\_\_  
Telephone Number: (\_\_\_\_) \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Number of Years Acquainted: \_\_\_\_\_

Name - First, Last: \_\_\_\_\_  
Telephone Number: (\_\_\_\_) \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Number of Years Acquainted: \_\_\_\_\_

Name - First, Last: \_\_\_\_\_  
Telephone Number: (\_\_\_\_) \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Number of Years Acquainted: \_\_\_\_\_

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired.

I authorize the verification of any or all information listed above. I further agree by signing this application to provide the church written notice of any new arrest, conviction, or substantiated child abuse within 72 hours.

Signature: \_\_\_\_\_

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

Submit a letter of interest, your resume and the completed application via mail or in person to:  
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ATTN: SPRC Chair  
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Newark, DE 19711