

Application for Employment
ALEXANDRIA UNITED METHODIST CHURCH
2210 Sixth Avenue East
Alexandria, MN 56308

PLEASE PRINT

Position(s) applied for _____ Date _____

Name _____
Last First Middle

Address _____
Street City State Zip

Telephone Number (____) _____ Soc. Security # _____

If necessary, best time to call you at home is _____ am or pm

May we contact you at work? _____ Yes _____ No

If yes, work number and best time to call (____) _____ am or pm

Are you legally eligible for employment in this country? _____ Yes _____ No

Date available for work. _____

Are you able to meet the attendance requirements of the position? _____ Yes _____ No

Will you work overtime if required? _____ Yes _____ No

Have you ever been bonded? _____ Yes _____ No

Have you been convicted of a felony in the last seven years? _____ Yes _____ No

If yes, please explain _____

REFERENCES

List names and telephone number of three business/work references who are not related to you and are not previous Supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Telephone Number	Years Known
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

EDUCATIONAL BACKGROUND

School	Years Completed	Degree
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYMENT HISTORY

List your last three employers, assignments or volunteer activities, starting with the most recent, including military Experience. Explain any gaps in employment in comments section below.

Employer	Phone	Dates Employed From To	Summarize job responsibilities & nature of the work performed
----------	-------	---------------------------	--

Address

Job Title Hourly Rate/Salary – Starting

Immediate Supervisor and Title

Reason for Leaving

May we contact for references? Yes No

Employer	Phone	Dates Employed From To	Summarize job responsibilities & nature of the work performed
----------	-------	---------------------------	--

Address

Job Title Hourly Rate/Salary – Starting

Immediate Supervisor and Title

Reason for Leaving

May we contact for references? Yes No

Employer	Phone	Dates Employed From To	Summarize job responsibilities & nature of the work performed
----------	-------	---------------------------	--

Address

Job Title Hourly Rate/Salary – Starting

Immediate Supervisor and Title

Reason for Leaving

May we contact for references? Yes No

Comments (including explanation of any gaps in employment)

Skills and Qualifications – Summarize any special training, skills, licenses, certificates and/or characteristics of yourself that may qualify you to perform job related functions for the position _____

List any additional information you would like us to consider _____
