

# Chapel Hill United Methodist Church

## Application for Employment

- All information obtained within this application will be held in strict confidence, subject to applicable law.
- Please complete all applicable sections and sign the last page.
- Please print clearly.

**Chapel Hill United Methodist Church prides itself on being an Equal Opportunity Employer. We will not discriminate in employment because of sex, age, race, physical disability, religion, ethnicity, mental disability, marital status, ancestry, or place of origin in accordance with applicable law.**

1

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

Name: \_\_\_\_\_ Telephone: (      ) \_\_\_\_\_

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

Postal Code: \_\_\_\_\_

Are you legally entitled to work in USA? \_\_\_\_\_

Position(s) applied for: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date you are available for employment: \_\_\_\_\_ Wage or salary desired: \_\_\_\_\_

Have you ever worked for Chapel Hill United Methodist Church before? \_\_\_\_\_ If yes, when and where? \_\_\_\_\_

2

### EDUCATIONAL BACKGROUND

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Highest level of education completed: \_\_\_\_\_

Name of educational institute: \_\_\_\_\_

What machines or equipment have you operated which relate to the position you have applied for? \_\_\_\_\_

Are there any skills, experience, or other qualifications which you feel would assist you in performing the duties of the position you have applied for? \_\_\_\_\_

**3a**

List below your last three employers, starting with the most recent.

Employer's Name: \_\_\_\_\_ Commencement Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Reason for Departure: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Telephone: (       ) \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Duties: \_\_\_\_\_

May we contact this employer? (If not, state brief reason): \_\_\_\_\_

**3b**

Employer's Name: \_\_\_\_\_ Commencement Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Reason for Departure: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Telephone: (       ) \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Duties: \_\_\_\_\_

May we contact this employer? (If not, state brief reason): \_\_\_\_\_

**3c**

Employer's Name: \_\_\_\_\_ Commencement Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Reason for Departure: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Telephone: (       ) \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Duties: \_\_\_\_\_

May we contact this employer? (If not, state brief reason): \_\_\_\_\_

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**4****If you are applying for a position that requires driving, please complete this section:**

Do you have a valid driver's license? \_\_\_\_\_ License #: \_\_\_\_\_ State: \_\_\_\_\_

**Note:** If you are hired you are required to present a copy of your driving record that is not more than 4 weeks old. A copy of this driving record will be placed into your personnel file and an annual update will be required.

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**5****False information given or implied on an application form is grounds for immediate dismissal without further notice.**

I hereby state that all information provided is accurate and may be verified by you. I agree that I may be discharged if Chapel Hill United Methodist Church at any time learns of falsification or material omission in the information provided on this application form and related documents. Chapel Hill United Methodist Church may contact my former employer in connection with the consideration of my employment with them. All references are hereby authorized to release all information which they may have relevant to my employment with them. I hereby release Chapel Hill United Methodist Church its affiliates, successors, and assigns, and all references from any liability that might be claimed because of information provided by such references.

I agree that I will follow all Company policies, rules, procedures, and all other directions pertaining to my employment. I understand that Chapel Hill United Methodist Church reserves the right to add, change, and/or delete any policies, procedures, work rules, and/or benefits at any time.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NO CONSIDERATION OF EMPLOYMENT WILL BE GIVEN TO ANY APPLICANT WHO DOES NOT SIGN THE ABOVE STATEMENT.**

**Note:** Additional personal information will be required to complete benefit forms after being hired.

Do you have any children between the ages of 3 months and 4 years that would need to be enrolled in our program while you are working? yes no

If yes, please list ages:

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What experience do you have working in a child care setting or in another setting with children ages 3 months to 4 years?

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As a ministry of Chapel Hill United Methodist Church, our Mother's Day Out Program assists with and participates in some church events throughout the year. Are you willing to help and participate in this area? yes no

Normal working hours for our Mother's Day Out Program are 9:00 a.m. to 3:15 p.m. We also offer extended hours of child care to families who choose to enroll. Are you available and willing to work as early at 8:15 a.m? yes no

If no, please explain.

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Approximately once per month, we have staff meetings after work. We do our best to arrange child care for these meetings, because teachers are required to attend. The meetings, generally are over by 4:30 p.m. Do you anticipate a problem being able to attend staff meetings?

yes no

If yes, please explain.

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