

## POSITION APPLIED FOR

Date Available: \_\_\_

DATE:

TITLE:

## EMPLOYMENT APPLICATION

An Equal Opportunity Employer

	FULL TIME / PART TIME:
GENERAL IINSTRUCTIONS	MIN ACCEPTABLE SALARY:
■ Type or Print in ink	
Specify a Position	REFERRED BY:
■ Signature Required	
CONTACT INFORMATION	
CONTACT INFORMATION	
Name	EMAIL ADDRESS
ADDRESS	FACEBOOK ID
CITY/STATE/ZIP	
HOME PHONE	CELL PHONE
TIMES AVAILABLE	TIMES UNAVAILABLE
Sun	TIMES SKAVAILABEL
Mon	
Tue	
Wed	
Thu	
Fri	
Sat	
I	
HAVE YOU PREVIOUSLY WORKED AT MORNINGSIDE CHURCH?	YES NO

HAVE YOU PREVIOUSLY APPLIED FOR WORK AT MORNINGSIDE CHURCH? YES

No

PLEASE ANSWER THE	FOLLOWING IN A	BRIEF PARA	GRAPH:		
WHAT LED YOU TO MORNING APPLYING?	SSIDE CHURCH AND W	HAT ARE YOUR	EXPECTATIO	NS OF THE POSITION	FOR WHICH YOU ARE
COMPUTER LITER PROGRAM	ACY:		SKILL RA	ating (Excellent, G	600d, Fair, None)
TYPING SKILLS				,	
MICROSOFT WORD					
MICROSOFT EXCEL					
OTHER:					
EDUCATION			·		
HIGH SCHOOL					
Name / Location			DIPLOMA		None
COLLEGE, UNIVERSIT	Y OR PROFESSIO	NAL SCHO	OL		
		DATES OF A	TTENDANCE		
NAME OF SCHOOL	Location	FROM	То	Major / minor	Type of Degree
DRIVER LICENSE NUMBER:	REGISTRATIO	STATE I	SCIIED.	Evere	ATION DATE:
INDINDER.		SIAIEI	33UED.	EXPIRA	ATION DATE.
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## **EMPLOYMENT**

DESCRIBE YOUR EMPLOYMENT HISTORY IN DETAIL BEGINNING WITH YOUR CURRENT OR MOST RECENT JOB. RESUME MAY BE ATTACHED FOR ADDITIONAL INFORMATION.

Name of Company and Type of Business	FROM		T	Ō
	Month	YEAR	Month	Year
TELEPHONE:	REASON FOR LEAV	/ING:		
Tomore	N	2221		
TITLE:	NAME OF SUPERVI	SOR:		
FULL TIME / PART TIME	Hours Per Week			
1 OLL TIME / I ARTITIME	TIOONST EN WEEK	.,		
DUTIES & RESPONSIBILITIES:	1			
District Commence (Management	1 111			
DID YOU SUPERVISE / MANAGE:	HC	OW MANY EMPLOYEES:		
Name of Company and Type of Business	F	ROM	Т	Ō
TVINE OF COMPANY AND THE OF BOOMESS	Month	YEAR	Month	YEAR
TELEPHONE:	REASON FOR LEAV	/ING:		
TITLE:	NAME OF SUPERVI	SOR:		
FULL TIME / PART TIME:	Hours per Week	:		
DUTIES & RESPONSIBILITIES:				
DUTIES & RESPONSIBILITIES.				
DID YOU SUPERVISE / MANAGE:	Но	OW MANY EMPLOYEES:		
			·	
NAME OF COMPANY AND TYPE OF BUSINESS	Month	ROM YEAR	Month I	O YEAR
	IVIONTH	TEAR	IVIONTH	TEAR
TELEPHONE:	REASON FOR LEAV	/ING:		
TEEE HONE.	REASONT ON ELAN	mvo.		
TITLE:	NAME OF SUPERVISOR:			
FULL TIME / PART TIME:	Hours per Week:			
District A Description with the second secon				
DUTIES & RESPONSIBILITIES:				
DID YOU SUPERVISE / MANAGE:	Ha	OW MANY EMPLOYEES:		
5.5 . 5 5 5 6 ERVISE / MARKAGE.	110	J		

PLEASE LIST ANY ADDITION	ONAL JOBS:			
COMPANY NAME	Phone	Contact		YEARS EMPLOYED
AFFILIATIONS AN	D RECOGNITION:			
CIVIC AND COMMUNITY ORG.				
PROFESSIONAL OR OTHER S	SOCIETIES:			
LEISURE TIME ACTIVITIES:				
REFERENCE LISTING F	OR:APPLICANT NAME			
CURRENT PASTOR:		CONTACT INF	ORMATION:	
PROFESSIONAL: PLEASE LIST THE NAMES AN REPORT ON YOUR WORK OR	ND CONTACT INFORMATION OF TV EDUCATIONAL EXPERIENCE.	VO OR THREE PREVIOU	S EMPLOYERS (	OR INDIVIDUALS WHO CAN
COMPANY NAME:	CONTACT NAME:	CONTA	CT TITLE:	PHONE:
PERSONAL: PLEASE LIST THE NAMES AND	D CONTACT INFORMATION OF THR	EE OR FOUR PERSONAL	REFERENCES.	
NAME:		PHONE:		

PLEASE SHARE BI	LOW YOUR I	PERSONAL 1	<b>TESTIMONY</b>	OF SALVATION
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