

Amity United Methodist Church
 825 North Estes Drive Chapel Hill, NC 27514
 919-967-7546 www.amityumc.org

Application for Employment

Date of Application: _____

Please Print

Social Security Number		Last Name		First Name		Middle Name	
Address (street number and name)				City		County	
State	Zip Code	Phone (home or where you can be reached)			Business phone		

Position Applied For: _____

Are you over the age of 18? _____ Do you have the legal right to work in the United States?: _____

Have you ever been convicted of breaking a law other than a minor traffic violation? (The offense and how recently you were convicted will be evaluated in relation to the job for which you are applying.)

YES NO If yes, give the date and explain fully on an additional piece of paper if more space is needed

Education

Circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College: 1 2 3 4

Schools	Name and Location	Dates Attended	Course of Study	Degree/Diploma
High School		to		
College or University		to		
		to		
		to		
		to		
		to		
Graduate or Professional		to		
		to		
Educational, Vocational Schools, etc.		to		
		to		
		to		
Professional Licenses & certifications				

References List the names, addresses and phone numbers of two people we may contact as references:

Work History – please go back 10 years

Current or Last Employer			Address			
Job Title			Supervisor's Name		No. Supervised by you	
Date employed (mo/yr)	Starting Salary \$ per	Ending Salary \$ per	Reason for leaving		May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date separated (mo/yr)			Duties:			
Full Time	Years	Months				
Part Time	Years	Months				
If part time, number of hours/week:						
Previous Employer			Address			
Job Title			Supervisor's Name		No. Supervised by you	
Date employed (mo/yr)	Starting Salary \$ per	Ending Salary \$ per	Reason for leaving		May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date separated (mo/yr)			Duties:			
Full Time	Years	Months				
Part Time	Years	Months				
If part time, number of hours/week:						
Previous Employer			Address			
Job Title			Supervisor's Name		No. Supervised by you	
Date employed (mo/yr)	Starting Salary \$ per	Ending Salary \$ per	Reason for leaving		May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date separated (mo/yr)			Duties:			
Full Time	Years	Months				
Part Time	Years	Months				
If part time, number of hours/week:						

(Use additional paper if necessary)

Employment with Amity United Methodist Church is on an at-will basis, meaning that either the employer or employee may terminate the employment relationship at any time, for any reason or no reason, with or without notice.

I certify that I have given true, accurate, and complete information on this form to the best of my knowledge. In the event confirmation is needed in connection with my work, I authorize educational institutions, associations, registration and licensing boards, and others to furnish whatever detail is available concerning my qualifications. I authorize investigations of all statements made in this application and understand that false information of documentation, or a failure to disclose relevant information may be grounds for rejection of my application, disciplinary action, or dismissal if I am employed, and/or criminal action. I further understand that dismissal shall be mandatory if fraudulent disclosures are given to meet position qualifications.

Signature of Applicant: _____ Date: _____