



Application for Employment

Church of Saint Boniface
501 Main Street
Cold Spring, MN 56320

(PLEASE TYPE OR PRINT REQUESTED INFORMATION IN BLACK OR BLUE INK.)

Date:

Personal Information

Name: _____
Last First Middle

Address: _____
Street City State Zip

Telephone Number: _____ Other Phone Number: _____ E-mail Address: _____

Position(s) applied for: _____ Referred to Position by: _____

Date available for work: _____
 What is your desired salary range or hourly rate of pay?
 \$ _____ Per _____

Have you ever been employed here before?
 Yes No
 If **yes**, give dates _____

Type of employment desired: (Check all that apply)
 Full-Time Seasonal Days
 Part-Time Temporary Evenings
 Weekends Any/Flexible

Are you legally eligible for employment in the United States?
 Yes No

Will you travel if job requires it?
 Yes No

Specific days of week and times available for work: _____

Will you work overtime if required?
 If **no**, please explain _____
 Yes No

Are you 18 years of age or older? Yes No

Have you submitted an application with us before? Yes No
 If **yes**, give date(s) and position(s) _____

Skills and Qualifications

Summarize any special training, skills, computer/software skills, licenses and/or certificates related to this position.

Employment History

Starting with your most recent employer, provide the following information. Include military service assignment and volunteer activities. (Exclude groups which indicate race, color, religion, sex or national origin.)

Employer	Telephone Number	Dates employed: Month/Year to Month/Year	
Street Address	City	State	Compensation (Final)
			<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ Per

Starting job title/final job title

Immediate Supervisor and title (for most recent position held)

Why did you leave?

Summarize the type of work performed and job responsibilities.

What did you like most about your position?

What were the things you liked least about the position?

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Employment History (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability.

If not addressed on previous page, have you ever been fired or asked to resign from a job?

Yes No

If **yes**, please explain

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree: <input type="checkbox"/> Certification: <input type="checkbox"/> Other:		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree: <input type="checkbox"/> Certification: <input type="checkbox"/> Other:		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree: <input type="checkbox"/> Certification: <input type="checkbox"/> Other:		

References

List the name and telephone number of three business/work references that are not related to you and are not listed on the previous page. If not applicable, list three school or personal references that are not related to you.

Name	Title	Relationship to You	Telephone	Number of Years Known

In your opinion, what makes you a good candidate for this position(s)?

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), including past and present supervisors, colleagues and employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering, and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state, or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's Pastor.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date ____/____/____



FOR AGENCY USE ONLY

Position: _____ Department: _____

Start Date: _____ Rate of Pay: _____

Special Arrangements: _____

Supervisor

Director

The following references were checked:

By _____
Name Title Date