

# Summit Christian Center Employment Application



Date \_\_\_\_\_

Position applied for \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip

Telephone ( ) \_\_\_\_\_  Work  Cell  Home Best time to call \_\_\_\_\_

Email \_\_\_\_\_

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

**Note:** If you are hired, you will be required to produce documents about your eligibility for employment in order to complete an I-9 Form.

## Employment History

### Current or Last Employer

Please complete all of the following blanks about your employment history even if you do not think the questions relate to the position you seek.

Business Name: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Telephone ( ) \_\_\_\_\_ May we contact? Yes  No

Dates of employment: From \_\_\_\_\_ To \_\_\_\_\_

Position or Title \_\_\_\_\_

Name/Title of Supervisor \_\_\_\_\_

Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Describe job duties, responsibilities and important accomplishments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving \_\_\_\_\_

\_\_\_\_\_

**Next Previous Employer**

Business Name: \_\_\_\_\_

Address \_\_\_\_\_

Street

City

State

Zip

Telephone ( ) \_\_\_\_\_ May we contact? Yes  No

Dates of employment: From \_\_\_\_\_ To \_\_\_\_\_

Position or Title \_\_\_\_\_

Name/Title of Supervisor \_\_\_\_\_

Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Describe job duties, responsibilities and important accomplishments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving \_\_\_\_\_

\_\_\_\_\_

**Next Previous Employer**

Business Name: \_\_\_\_\_

Address \_\_\_\_\_

Street

City

State

Zip

Telephone ( ) \_\_\_\_\_ May we contact? Yes  No

Dates of employment: From \_\_\_\_\_ To \_\_\_\_\_

Position or Title \_\_\_\_\_

Name/Title of Supervisor \_\_\_\_\_

Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Describe job duties, responsibilities and important accomplishments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving \_\_\_\_\_

\_\_\_\_\_

## Educational Background

	Name	City	Dates Attended	Degree
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Graduate	_____	_____	_____	_____
Other	_____	_____	_____	_____

If you are presently enrolled in a school, what are you studying? \_\_\_\_\_

List any special skills, training, or knowledge you have for this position and any other achievements you would like considered. \_\_\_\_\_

\_\_\_\_\_

## References

If possible, list three business references who are not related to you and who were not your previous supervisors. Also, one personal reference who is not related to you.

Name	Years known	
_____		
Telephone	_____	
_____		
Address	_____	
_____		
City	State	Zip
_____		
Relationship		
_____		

Name	Years known	
_____		
Telephone	_____	
_____		
Address	_____	
_____		
City	State	Zip
_____		
Relationship		
_____		

Name	Years known	
_____		
Telephone	_____	
_____		
Address	_____	
_____		
City	State	Zip
_____		
Relationship		
_____		

Name	Years known	
_____		
Telephone	_____	
_____		
Address	_____	
_____		
City	State	Zip
_____		
Relationship		
_____		

I understand that this application may be withdrawn or my employment may be terminated if I have made any misrepresentations on this form. I authorize the church to contact all references to seek job-related information about me, and I release the church and all other persons and companies from liability for furnishing or obtaining such information.

---

Signature

### **Authorization and Release of Information**

I authorize Summit Christian Center and its agents to contact any person or employers listed on my employment application to confirm information supplied by me and/or to obtain other material information about my employment. I authorize all persons and employers to release any information about my qualifications. I also release any person or employer which provides information from any and all liability for providing that information.

---

Signature

---

Print Name

---

Date





**LEARNING CENTER APPLICANT QUESTIONNAIRE**

1. What are your strengths?

---

---

2. What are your weaknesses?

---

---

3. What would you like to be able to do better?

---

---

4. How would you handle a screaming 2 year old?

---

---

5. How would you handle a child using foul language?

---

---

6. How would you handle a 1 year old who bites?

---

---

7. What is the most important thing a parent wants to hear about their child at the end of the day?

---

---

8. How many days a month can a teacher be absent?

---

---

9. How do you handle criticism?

---

---

10. When you are not finished with certain tasks by the end of the day, would you be willing to stay late to complete them?

---

---

11. How often do you attempt to learn more about your job in order to improve your performance?

---

---

12. How would you present a special event to children that you do not personally enjoy?

---

---

13. If you are having a problem at work would you discuss it with co-workers, tell your supervisor, or solve it yourself?

---

---

14. How would you respond if asked to complete a task not in your job description?

---

---

15. Do you mind sharing your work space, or would you prefer to have your own work space?

---

---

16. Do you prefer to work in a structured environment or an environment that allows more choices?

---

---

17. Have you won any awards or scholarships for overall success in school or in the workplace?

---

---

18. If you fail at a task how do you respond?

---

---

19. Do you enjoy helping others achieve a similar measure of success to yours?

---

---

20. How would someone describe your most common emotion?

---

---

21. What do you plan to be doing 1 year from now?

---

---



2553 Jackson Keller Suite 200
San Antonio, TX 78230
Phone: 888-873-1714
Toll-Free Fax: 1-844-255-4087
www.RecordPros.net
Release@RecordPros.net

BACKGROUND INQUIRY RELEASE

In connection with my application for employment/residency, I understand that an investigative background inquiry is to be made on myself, including, but not limited to, identity and prior address(es) verification, criminal history, driving record, consumer credit history, education verification, prior employment verification and other references, as well as other information.

I, further understand that for the purposes of this background inquiry, various sources will be contacted to provide information, including but not limited to various Federal, State, County, municipal, corporate, private and other agencies, which may maintain records concerning my past activities relating to my criminal conduct, civil court litigation, driving record, and credit performance, as well as various other experiences.

I, hereby authorize without reservation any company, agency, party or other source contacted to furnish the above information as requested. I do hereby release, discharge and indemnify the prospective employer/landlord, it's agents and associates to the full extent permitted by law from any claims, damages, losses, liabilities, cost and expenses arising from the retrieving and reporting of the requested information. I am willing and acknowledge that a photocopy of this authorization be accepted with the same authority as the original. PLEASE PRINT CLEARLY & USE YOUR FULL LEGAL NAME.

Company Name: \_\_\_\_\_

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

Applicant Full Legal Name:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Maiden/Alias Names: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Driver's License/ID: \_\_\_\_\_ State: \_\_\_\_\_

In connection with this request, I \_\_\_\_\_ hereby release the aforesaid parties from any liability and responsibility for obtaining my credit report.

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