

APPLICATION FOR EMPLOYMENT

Summit Church
2575 Summit Church Road
San Antonio, TX 78259

Summit Church is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, ancestry, age, sex, national origin, disability or handicap, veteran status, or any other categories protected by federal, state or local law.

PERSONAL:

Name _____ Date _____
Last First Middle

Address _____

Phone Number _____ Work Cell Home

Email Address _____

Position Sought _____ Full Time Part Time

Are you over 18 years old? Yes No

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

(If offered employment, you will be required to provide documentation to verify eligibility.)

EDUCATION: Please indicate education or training which you believe qualifies you for the position you are seeking.

High School: No. of Years Completed (circle one) 1 2 3 4

Diploma: Yes No

G.E.D.: Yes No

School(s) _____ City/State _____

College and/or Vocational School:

Number of Years Completed (circle one) 1 2 3 4

School(s) _____ City/State _____

Major _____ Degrees Earned _____

Other Training or Degrees:

School(s) _____ City/State _____

Course _____ Degree or Certificate Earned _____

PROFESSIONAL LICENSE OR MEMBERSHIP:

Type of License(s) Held _____

Other Professional Memberships _____

(You need not disclose membership in professional organizations that may reveal information regarding race, color, sex, national origin, ancestry, age, disability, veteran status or any other protected status.)

**This application for employment is good for 30 days only.
Consideration for employment after 30 days requires a new application.**

Have you ever been employed in any department of Summit Church? Yes No

If so, please state department name and dates of employment:

EMPLOYMENT: List last employer first, including U.S. Military Service.

May we contact your present employer? ____ Yes ____ No

If any employment was under a different name, indicate name _____

Employer _____

Address _____

Telephone _____ Position _____

Dates of Employment: From _____ To _____ FT ____ PT ____ No. of Hrs. _____
Mo/Yr. Mo/Yr.

Supervisor _____ Department _____

Duties _____

Reason for Leaving _____

Employer _____

Address _____

Telephone _____ Position _____

Dates of Employment: From _____ To _____ FT ____ PT ____ No. of Hrs. _____
Mo/Yr. Mo/Yr.

Supervisor _____ Department _____

Duties _____

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Mo/Yr. Mo/Yr.

Supervisor _____ Department _____

Duties _____

Reason for Leaving _____

If you wish to submit additional work experience, please provide the above information for each additional Employer on a separate piece of paper.

Explain any gaps in work history: _____

Have you ever been discharged or asked to resign from a job? __Yes __No

If yes, explain: _____

REFERENCES: Please provide information for at least **FOUR** references (two professional, two personal) who may be contacted on your behalf.

Professional

Personal

Name _____

Name _____

Address _____

Address _____

Phone (____) _____

Phone (____) _____

Name _____

Name _____

Address _____

Address _____

Phone (____) _____

Phone (____) _____

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I authorize Summit Church and its agents to contact any person or employers listed on my employment application to verify 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 hereby release Summit Church and any person/employer from any liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of Summit Church. However, I further understand that neither the policies, rules, regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant _____ Date: _____



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, its 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: _____