



Christ Episcopal Church  
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## EMPLOYMENT APPLICATION

INSTRUCTIONS: Please complete all of the questions, accurately and fully.  
Attach additional sheets if needed.

Today's Date	
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Position Appling For:	
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### A. BACKGROUND & PERSONAL INFORMATION

1. NAME \_\_\_\_\_  
As it appears on your social security card

2. SOCIAL SECURITY NUMBER \_\_\_\_\_

3. DRIVER LICENSE                      NO \_\_\_ YES \_\_\_ STATE \_\_\_\_\_

4. DRIVER LICENSE NUMBER \_\_\_\_\_

5. CURRENT ADDRESS : \_\_\_\_\_  
Number & Street

\_\_\_\_\_

City

State & Zip Code

6. NUMBER OF YEARS AT CURRENT RESIDENCE \_\_\_\_\_

**IF LESS THAN 10 YEARS PLEASE LIST PRIOR ADDRESSES FOR THE PAST 10 YEARS**

**PRIOR ADDRESS** \_\_\_\_\_ **No. of Years** \_\_\_\_\_  
Number & Street

\_\_\_\_\_  
City State & Zip Code

**PRIOR ADDRESS** \_\_\_\_\_ **No. of Years** \_\_\_\_\_  
Number & Street

\_\_\_\_\_  
City State & Zip Code

**7. TELEPHONE NUMBER :** \_\_\_\_\_  
AREA CODE NNN - NNNN

**8. CELL PHONE NUMBER :** \_\_\_\_\_  
AREA CODE NNN - NNNN

**9. EMAIL ADDRESS:** \_\_\_\_\_ @ \_\_\_\_\_

**9. BEST TIME TO CONTACT YOU** \_\_\_\_\_ **AM** \_\_\_\_\_ **PM**

**10. Are you legally eligible to work in this country?** \_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

**Note; IF you are hired, you will be required to show documents verifying Your employment eligibility and identity to complete the INS Form 1-9 as required by the Immigration Reform and Control Act.**

**11. Have you ever been convicted of or pled guilty or no contest to a crime other than a minor traffic violation?** \_\_\_\_\_ **YES** \_\_\_\_\_ **NO**  
(If yes please explain on a separate sheet of paper)

**B. EMPLOYMENT HISTORY**

Please complete for your current or most recent employer. Note all positions held, using separate paper if necessary.

12. Name of Employer: \_\_\_\_\_

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

\_\_\_\_\_

City State & Zip Code

Telephone(s) including area code \_\_\_\_\_

Dates of Employment from: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Ending \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Month Year Month Year

Current or Final Salary: \$ \_\_\_\_\_ Weekly \_\_\_ Monthly \_\_\_ Annual \_\_\_

(Check one)

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

POSITION(S) HELD	FROM (month/yr)	TO (month/yr)	KEY DUTIES

Most recent supervisor: \_\_\_\_\_ Title \_\_\_\_\_

Phone Number: \_\_\_\_\_ May we contact this person? YES \_\_\_ NO \_\_\_

If no, then whom may we contact? \_\_\_\_\_

Name/phone number

**13. Name of Employer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

City State & Zip Code

**Telephone(s) including area code** \_\_\_\_\_

**Dates of Employment from:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Ending** \_\_\_\_/\_\_\_\_/\_\_\_\_

Month Year Month Year

**Current or Final Salary:** \$ \_\_\_\_\_ **Weekly** \_\_\_ **Monthly** \_\_\_ **Annual** \_\_\_

(Check one)

**Reason for leaving:** \_\_\_\_\_

POSITION(S) HELD	FROM (month/yr)	TO (month/yr)	KEY DUTIES

**Name or Title of immediate supervisor:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **May we contact this person?** YES \_\_\_ NO \_\_\_

**If no, when may we contact him or her?** \_\_\_\_\_

**May we contact this person?** YES \_\_\_ NO \_\_\_ **Phone Number** \_\_\_\_\_

**Please continue on a separate paper listing all positions held for the past ten years. You may replicate this page as required.**

**C. EDUCATION**

NAME OF SCHOOL	ADDRESS CITY STATE	DID YOU GRADUATE		DEGREE, MAJOR OR CERTIFICATE EARNED
		YES	NO	
High school				
College				
Graduate				
Other Please List				

**Please describe other certificates, training or skills you would like us to consider when reviewing your application.**

**Please list your affiliations and/or professional associations or organizations.**

**D. REFERENCES**

**List three references that are not related to you, that we may contact in connection with your application for employment.**

	REFERENCE 1		REFERENCE 2		REFERENCE 3	
<b>NAME</b> (Title/First Last Name)						
<b>Address</b>						
<b>City</b> <b>State</b> <b>Zip Code</b>						
<b>Phone</b>						
<b>Best Time To Contact</b> Check one	<b>AM</b>	<b>PM</b>	<b>AM</b>	<b>PM</b>	<b>AM</b>	<b>PM</b>
<b>Relationship to you if any</b>						
<b>(check Column)</b>	<b>Type of Reference</b>		<b>Type of Reference</b>		<b>Type of Reference</b>	
<b>Personal</b>						
<b>Professional</b>						
<b>Other</b>						
<b>Years Known</b>						

**E. ACKNOWLEDGEMENT, RELEASE AND SIGNATURE**

**To the best of my knowledge, the information contained in this application is complete and accurate. I understand that providing false information is grounds for not hiring me or my discharge, if I have already been hired.**

**I authorize any person or organization, whether or not identified in this application to provide any information concerning my previous employment education, credit history, driving record, criminal conviction record or other qualifications for my employment. I also authorize the church to request and receive such information.**

**If hired, I agree to be bound by the church’s bylaws and policies. I understand That these may be changed, withdrawn, added or interpreted at any time at the church’s sole discretion and without prior notice to me.**

**I also understand that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the church or myself.**

**Nothing contained in this application or in any pre-employment communication is intended to or creates a contract between myself and the church for either employment or providing of any benefit.**

**I have read and understand the above provisions.**

\_\_\_\_\_ Date \_\_\_\_\_  
**(Signature of applicant)**

\_\_\_\_\_  
**Print Name of Applicant**