



first baptist church  
universal city

1401 Pat Booker Rd, Universal City, TX 78148

## Application for Employment

Phone: (210) 658-6394

Fax: (210) 566-7847

*Please Note: This application will become void and not considered after 90 days from the date of application. After the 90-day period, it may be necessary to submit a new application to be considered for employment.*

**Please respond to all questions and do not leave any response space blank. If you do not believe that a response is applicable, put "not applicable" in the blank. Use additional paper to respond if necessary. If appropriate, you may state "see resume."**

### PERSONAL INFORMATION

**POSITION APPLYING FOR:** \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
LAST FIRST MIDDLE MAIDEN

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 City, State: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Date Available: \_\_\_\_\_

Soc. Sec. #: \_\_\_\_\_ Are you 18 or older? Yes \_\_\_; If No \_\_\_, Include DOB: \_\_\_\_\_

Are you a member of First Baptist Church of Universal City? Yes \_\_\_, Since \_\_\_\_\_ No \_\_\_

If position requires driving, please complete:  
 Drivers License Number: \_\_\_\_\_ State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

List any denominations or churches of which you have been a member and all volunteer church service since age 17. Include address and approximate dates. (Attach a separate page if necessary)

Church	City	State	Address	Service	Dates

Please provide the names and phone numbers of three personal references not related to you.

Name	Home Phone	Work Phone

**EMPLOYMENT HISTORY**

List all of your employment beginning with your current or most recent job. (Use additional pages if necessary.)

**Employer #1 (Current or Most Recent)**

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Date of Hire: \_\_\_\_\_ Date of Termination: \_\_\_\_\_ Last Rate of Pay: \_\_\_\_\_  
Work Performed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
May the church contact this employer? Yes \_\_\_\_\_ No \_\_\_\_\_. If not, who may be contacted to verify this employment? \_\_\_\_\_

**Employer #2**

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Date of Hire: \_\_\_\_\_ Date of Termination: \_\_\_\_\_ Last Rate of Pay: \_\_\_\_\_  
Work Performed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
May the church contact this employer? Yes \_\_\_\_\_ No \_\_\_\_\_. If not, who may be contacted to verify this employment? \_\_\_\_\_

**Employer #3**

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Date of Hire: \_\_\_\_\_ Date of Termination: \_\_\_\_\_ Last Rate of Pay: \_\_\_\_\_  
Work Performed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
May the church contact this employer? Yes \_\_\_\_\_ No \_\_\_\_\_. If not, who may be contacted to verify this employment? \_\_\_\_\_

Please list and explain all periods of unemployment (four weeks or longer) since high school.

Dates of Unemployment	Explanation

**EDUCATION**

Name of <b>High School</b> : _____	City, State: _____
Years Completed (Circle one) 1 2 3 4	Graduate? Yes _____ No _____ GED _____

**List all College/University/Technical or Vocational Schools Attended:**

Name of School: _____	City, State: _____
Years Completed (Circle one) 1 2 3 4	Graduate? Yes _____ No _____
Course of Study _____	Degree/Certificates _____

Name of School: _____	City, State: _____
Years Completed (Circle one) 1 2 3 4	Graduate? Yes _____ No _____
Course of Study _____	Degree/Certificates _____

List any special skills, training, apprenticeship, or extra curricular activities that would apply to this position.

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List any additional education, training or qualifications which may apply to this position. \_\_\_\_\_

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Are you able to perform job-related functions as described in the job description \_\_\_\_\_

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**DECLARATIONS**

The information contained in this application is correct to the best of my knowledge. I completed this application on my own without the assistance of another.

I authorize the church to obtain information from any source, including but not limited to references, employers, and churches listed herein. I also authorize any sources, references, churches, other organizations, or employers to give you any information, including opinions, that they may have regarding my character and fitness for the job for which I am applying.

In consideration of the receipt and evaluation of this application by the church, I hereby release any individual, church, children's organization, charity, employer, reference, or any other person or organization, both collectively and individually from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply with this authorization.

Should my application be accepted, I agree to be bound by the Bylaws and policies of the church, which are updated from time to time and to refrain from conduct which might reflect negatively on the church.

In the event I am employed, I understand that all employees are subjected to termination at the discretion of the church. If, in the event I choose to voluntarily terminate my employment, I am free to do so at any time; and if I choose to give proper notice of termination, the church may either permit me to continue my employment during the notice period or may accept my resignation immediately.

I understand that, in the event I am employed by the church, my compensation, hours of service, and all other terms and conditions of employment are subject to modification or change by the church at the church's discretion. I understand that, if employed, any misrepresentation made by me in completing this application shall be considered as sufficient cause for dismissal without advance notice.

I further state that I have carefully read the foregoing release and know the contents thereof and sign this release as my own free act. I understand that any misrepresentation or omission of a material fact on my application may be justification for refusal of employment.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_