## FREDERICKSBURG UNITED METHODIST CHURCH

308 Hanover St. Virginia, 22401 (540) 373-9021 <u>www.fumcva.org/</u>

## **APPLICATION FOR EMPLOYMENT**

Fredericksburg United Methodist Church is an equal opportunity employer and does not discriminate on the basis of race, color, creed, ancestry, age, sex, marital status, national origin, physical or mental disability, or veteran status. Fredericksburg UMC may discriminate on the basis of religion only where an applicant's faith is a bona fide occupational qualification of the position sought.

This application for employment is valid for 90 days. Consideration for employment after 90 days requires a new application.

Date			
Name			
Name LAST FI	IRST MIDD	LE	
Address NUMBER & STREET	CITY	STATE	ZIP CODE
Position Applied For			
Full Time Part Time			
Date Available Salary Desired	l		
Phone Number	Alternate Phone		
Are you over 18 years old? Yes No			
Yes No			
Education: Please indicate your education o	or training which you be	ieve qualifies you for t	he position you are see
High School: Number of years completed (cire	ccle one) 1 2 3 4 Diploma:	Yes No C	GED: Yes <u>No</u>
School (Name and address)			
College and/or Vocational School: Number	of years completed <i>(circl</i>	le one) 1 2 3 4	
School(s)			
Address/City/State			

## **Other Training or Degrees:**

School(	s)	
Address	/City/State	
Course		Degrees and/or Certificate Earned/Date
Professional Registrati	on:	
State of Virginia	a License Number	Expiration Date
Other State Lice	nse Number	Expiration Date
Record of Conviction:		
		raffic offense (including while in military service)? YesNo
		ualify you for employment. Rather, such factors as age and date and rehabilitation will be considered.)
		rs, last employer first, including U.S. Military Service.
May we contact your pro-	esent employer? Yes No	
If any employment was	under a different name, indicate name	ne:
Have you ever been emp If yes, please be	bloyed by another United Methodis sure to include this information un	t church? Yes No der employment.
<b>Employment History</b>		
Employer		
Address		
Telephone	Position	Date of Employment: From to Mo/Yr Mo/Yr
Salary	Supervisor	Department
Responsibilities/Duties		

Full time	Part time	_Number of hours/week_	
Reason for Leaving			
Employer			
Address			
Telephone	Position		Date of Employment: From to Mo/Yr Mo/Yr
			Department
	Part time		
Reason for Leaving			
If you wish to describe paper.	additional work experience, att	ach the above informatio	n for each position on a separate piece of
Explain any gaps in wo	ork history:		
Have you ever been dis If yes, please ex	scharged or asked to resign fro	om a job? Yes N	lo

<b>Professional References</b>	Personal References
Name	Name
Address	Address
Telephone ( )	Telephone ( )
Name	Name
Address	Address
Telephone ( )	Telephone ( )

## **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 and authorize Fredericksburg United Methodist Church to verify their accuracy and to obtain reference information on my work performance.

I hereby release the Church from any and all 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 omission 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 the Church. However, I further understand that neither the policies, rules, regulations of employment, or 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 is at will. I further understand that either I or the Employer may terminate my employment at any time with or without notice or cause.

Applicant's Signature Da	ate
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