

### A Ministry of the Green Lawn Church of Christ

## **APPLICATION for Teachers and Substitutes**

## \*STRICTLY CONFIDENTIAL\*

THIS DOCUMENT CONTAINS CONFIDENTIAL INFORMATION AND MAY ONLY BE VIEWED BY THE MINISTRY STAFF, ELDERS AND ANY PERSON OR COMMITTEE AUTHORIZED BY THE ELDERS HAVING THE AUTHORITY TO MAKE PERSONNEL DECISIONS. NO OTHER PERSONS ARE AUTHORIZED TO VIEW THIS INFORMATION. ANY ATTEMPT TO REVIEW, DUPLICATE, DISTRIBUTE OR DISCLOSE THE INFORMATION CONTAINED HEREIN WITHOUT PROPER AUTHORIZATION MAY RESULT IN SERIOUS CONSEQUENCES.

This application will be used to help the church provide a safe and secure environment for those who are employed by the Green Lawn Church of Christ, participate in church activities, and use church facilities. This application is to be completed by all applicants for any staff position. Thank you for taking the time to completely fill it out.

If you run out of space to fully answer any question, please complete your answer on a separate sheet and attach it to the form. Return completed form to <a href="mailto:brighthorizons@greenlawn.org">brighthorizons@greenlawn.org</a> or 5701 19th Street, Lubbock, Texas 79407.

Name				
Last	First	Middle	Maiden	Date of application
•	me other than the one listed			list it here:
Present Address:			Email:	
Cit	y State	e Zip		
Home Phone Number	:	Cell P	hone Number:	
Date/Place of Birth: _				
	Ba	ckground Informati	ion	
Church attendance for	r the past five years (name	of congregation and	dates attended):	
a. Current	Congregation:			
b. Previous	s Congregation:			
c. Previous	s Congregation:			

# **Training and Experience**

List any training, skills, or experience you have had that qualifies you for the position you are seeking, including any professional license or certification:					
	Personal References				
List below two personal refere	nces who are well acquainted with you. I	Do not to list relatives.			
Name	Address	Phone Number			
	Additional Information				
	foregoing information or give additional employment with the Green Lawn church				

**Employment History**List your last 3 employers beginning with the most recent. (Complete if you are applying for a compensated position.)

1. Employer's Name:		
Employer's Phone:		
Date Employed:		
Reason for leaving:		<del></del>
Position Held:		
Supervisor's Name:		
Description of Duties:		
2. Employer's Name:		
Employer's Address:		
Employer's Phone:		
Date Employed:		
Reason for leaving:		
Position Held:		
Supervisor's Name:		
Description of Duties:		
<del></del>		
3. Employer's Name:		
Employer's Address:		
Employer's Phone:		
Date Employed:	Date employment ended:	
Reason for leaving:		
Position Held:		
Supervisor's Name:		
Description of Duties:		
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## NOTICE - BACKGROUND INVESTIGATION

In connection with your involvement with children and youth at Green Lawn Church of Christ (the "Church"), notice is hereby given that a consumer report and/or investigative consumer report may be obtained from a consumer reporting agency. These reports may contain information about your character, general reputation, personal characteristics and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends or associates. The reports may also contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, education or employment history, or other background checks as applicable.

You hereby authorize any references, current or former employers, current or former supervisors, churches or church related agencies, or any other person or organization, whether or not identified in this application, to give the Church any information (including opinions) regarding my character and fitness for this position. You also agree to release any individual, employer, church or church agency or official, reference or any other person or organization, including record custodians, both collectively and individually, and whether or not identified in this application, from any and all liability for damages of whatever kind or nature which may at any time result to you, your heirs, or family, on account of compliance or any attempts to comply with this authorization, excepting only the communication of knowingly false information.

You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting the Church and Protect My Ministry 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618; Phone: 1-800-319-5581. For information about Protect My Ministry's privacy practices, see www.protectmyministry.com. The scope of this notice and below authorization is not limited to the present and, if you are involved in the ministry of the Church, will continue throughout the course of your involvement and allow the Church to conduct future screenings for retention or reassignment, as permitted by law and unless revoked by you in writing.

## ACKNOWLEDGEMENT AND AUTHORIZATION

By signing below, I hereby authorize the obtaining of consumer reports, investigative consumer reports, and/or reference checks by the Church at any time after receipt of this authorization and throughout the course of my involvement, if applicable.

I HAVE READ AND UNDERSTAND THE ABOVE PROVISIONS AND AGREE TO THEM. THIS IS A LEGAL DOCUMENT AND I UNDERSTAND THAT I HAVE THE OPPORTUNITY TO CONSULT WITH AN ATTORNEY BEFORE SIGNING IT.

Signature:	Date:
Print Name:	Last Four Digits of SSN:
Note: Unsigned applications will not be considered.	