

Employment Application

Name:			Date 9	Submitted:	
LAST	FIRST	MIDDLE			
PERSONAL DA	TA				
Address:					
STREET			STATE		
Telephone:					_
CELL			HOME		
E-mail:					_
Social Security	#:				
Position or type	e of work o	lesired:			
Availability: Have you been before?				bstitute ch of Wise Coun	ty
Current Church	Affiliation				
Church Staff Contact Name:					
Church Staff Contact Phone #:					
Church Staff Co	ntact Ema	nil:			
How many time					
Do you hold a p	osition of	service or le	adership in th	ne church?	
If yes, in which area or leadership role do you serve?					

^{**}Please attach a resume. **

PERSONAL REFERENCES

(no relatives and preferably at least one member	of this church)
Name	
Address	
Phone	
Name	
Address	
Phone	
Name	
Address	
Phone	

APPLICANTS STATEMENT

I understand and agree that any misrepresentation by me in this application will be grounds for immediate termination if I have been employed. I give Grace Fellowship Church of Wise County and/or Grace Kids Early Learning the right to investigate any references and to secure additional information about me, if job related. I hereby release from reliability Grace Fellowship Church of Wise County and representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information. I understand that a criminal background check will be conducted on me as part of the application process and I consent to any such check. I also understand that I may be required to have a physical examination including a drug screen.

Should employment result from this, I understand that I will be required to provide documentation to establish identity and employment eligibility. I understand that just as I am free to resign at any time, Grace Fellowship Church of Wise County & Grace Kids Early Learning reserves the right to terminate my employment at any time, with or without prior notice. I understand that no representative of Grace Fellowship Church of Wise County has the authority to make any assurances to the contrary. Furthermore, I agree to abide by the ministry guidelines and requirements of Grace Fellowship of Wise County. I hereby attest I that I am of good moral character and to refrain from any unscriptural conduct.

Signature of Applicant:	Date
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