

ALTO REFORMED CHURCH

Employment Application



APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security		Desired Salary	
Position Applied for					
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this church?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Please, tell us about your family.					
Please, tell us about the most influential person in your life.					
<p>Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.</p>					
Have you ever pled "guilty" or "no contest" to, or been convicted of a crime?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		

SPIRITUAL FORMATION AND GIFTING

What does it mean to have a relationship with Jesus to you? How has it affected your life?			
Regarding your current church involvement: Are you a member of the church?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	In what ministries have you served? What was your role?
Church Name			City, State
			Dates
Regarding your previous church involvement: Were you a member of the church?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	In what ministries have you served? What was your role?
Church Name			City, State
			Dates
Regarding your previous church involvement: Were you a member of the church?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	In what ministries have you served? What was your role?
Church Name			City, State
			Dates
Regarding your previous church involvement: Were you a member of the church?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	In what ministries have you served? What was your role?
Church Name			City, State
			Dates
Regarding your previous church involvement: Were you a member of the church?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	In what ministries have you served? What was your role?
Church Name			City, State
			Dates
Have you been baptized?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	When & where?
What ministry have you most enjoyed serving in? Why?			
What is your personal mission in life?			
What are some of your core values?			
How do you believe your family will feel about you being on staff at the church?			

Our Basic Beliefs

Please review Alto's Statement of Faith at <https://www.altoreformedchurch.org/our-beliefs.html> and the Leadership Covenant at <https://www.altoreformedchurch.org/career-opportunities.html>

Is there anything above that you disagree with? Please explain:

EDUCATION

High School			Address				
From		To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
College			Address				
From		To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
Other			Address				
From		To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
Other			Address				
From		To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	

Please provide a copy of your teaching license. Scan and email to adrea@altoreformedchurch.org

HOBBIES & ACTIVITIES

I really enjoy...

I really enjoy...

REFERENCES*Please list three professional references.*

Full Name		Relationship to you	
Length of time known		Phone	
Company		E-mail	
Address			

Full Name		Relationship to you	
Length of time known		Phone	
Company		E-mail	
Address			

Full Name		Relationship to you	
Length of time known		Phone	
Company		E-mail	
Address			

Please list two or three character/spiritual references.

Full Name		Relationship to you	
Length of time known		Phone	
Company		E-mail	
Address			

Full Name		Relationship to you	
Length of time known		Phone	
Company		E-mail	
Address			

Full Name		Relationship to you	
Length of time known		Phone	
Company		E-mail	
Address			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

PREVIOUS EMPLOYMENT

Company		Supervisor	
Address		Phone	
Job Title		Compensation \$	Email
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Responsibilities & Type of Work			
What did/do you like most about this position?			
What did/do you least like about the position?			
Company		Supervisor	
Address		Phone	
Job Title		Compensation \$	Email
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Responsibilities & Type of Work			
What did/do you like most about this position?			
What did/do you least like about the position?			
Company		Supervisor	
Address		Phone	
Job Title		Compensation \$	Email
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Responsibilities & Type of Work			
What did/do you like most about this position?			
What did/do you least like about the position?			

DISCLAIMER AND SIGNATURE

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT By including my name below, I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature

Date

(Submission of this form is accepted as consent to the above statement.)