## EMPLOYMENT APPLICATION FOR COMMUNITY OUTREACH MINISTRIES

		Date		
Personal Informat	ion			
Last Name:	First Name:	Middle:		
Address:	City/State/ Zip:	City/State/ Zip:		
Phone:	E-mail Address:	E-mail Address:		
Date of Birth:				
Basic Information				
<ol> <li>If offered a position, v</li> <li>If hired can you show</li> <li>Have you ever been d</li> <li>Have you ever been comprisonment?</li> </ol>	plying	in the U.S.? □Yes □No any position? □Yes □No eanor which resulted in □Yes □No		
Education				
Please list on the following lines all	schools attended any other pertinent in	iformation about your education.		
School(s)	Degree/Subj	ect Studied (if applicable)		
High School:				
College (Including dates atter	nded):			
Post-Graduate/Other:				

## **Work Experience:**

Please list your previous three employers, beginning with the most recent.

Name of Employer:	Name of Last Supervisor:		
Address:	Employment Dates:to	)	
City, State & Zip:	Salary / Wage:	Salary / Wage:	
Phone Number:	Last Job Title:	Last Job Title:	
Reason for Leaving (Please be Specific):			
		-	
Address:	Employment Dates:to	)	
City, State & Zip:	Salary / Wage:	Salary / Wage:	
Phone Number:	Last Job Title:		
Reason for Leaving (Please be Specific):			
Address:	Employment Dates:to	)	
City, State & Zip:	Salary / Wage:		
Phone Number:	Last Job Title:	Last Job Title:	
Reason for Leaving (Please be Specific):			
		•	
	Address:  City, State & Zip:  Phone Number:  Reason for Leaving (Please be Specific):  List the jobs you held, duties performed, skills used this company:  Name of Employer:  Address:  City, State & Zip:  Phone Number:  Reason for Leaving (Please be Specific):  List the jobs you held, duties performed, skills used this company:  Name of Employer:  Address:  City, State & Zip:  Phone Number:  Reason for Leaving (Please be Specific):  List the jobs you held, duties performed, skills used this company:  List the jobs you held, duties performed, skills used this company:  City, State & Zip:  Phone Number:  List the jobs you held, duties performed, skills used this company:  List the jobs you held, duties performed, skills used this company:	Reason for Leaving (Please be Specific):  List the jobs you held, duties performed, skills used or learned, advancements or promotions we at this company:  Name of Employer:  Address:  Employment Dates:  City, State & Zip:  Phone Number:  Reason for Leaving (Please be Specific):  List the jobs you held, duties performed, skills used or learned, advancements or promotions we at this company:  Name of Employer:  Name of Employer:  Address:  Employment Dates:  Employment Dates:  City, State & Zip:  Salary / Wage:  Employment Dates:  City, State & Zip:  Salary / Wage:	

As a part of Community Outreach Ministries' selection process, a representative of the company will check your educational and employment references. We may contact references provided by you as well as other knowledgeable sources. We will ask questions concerning your education and work experience. All disclosures required by law will be made to you.

## **References:**

Please list <b>three</b> references other than relatives, <b>one</b> of v	which needs to be curr	ent or previous employer:
Name	Position:	
Company:	_Phone:	
Email:		Yrs. Acquainted:
Address:		
COM OFFICAL USE ONLY: Documentation of Refere	nce check:	
Date contacted: Second Attempt		
Method of contact: ☐ Phone ☐ E-mail ☐ Fax Notes:	□ Letter	
Reference Checked by:		
Name	Position:	
Company:		
Email:		
Address:		
COM OFFICAL USE ONLY: Documentation of Refere		
Date contacted: Second Attempt		
Method of contact: $\square$ Phone $\square$ E-mail $\square$ Fax Notes:	□ Letter	
Reference Checked by:		

## **CURRENT OR PREVIOUS EMPLOYER REFERENCE:** \_\_\_\_\_\_Position:\_\_\_\_\_ Name \_\_\_\_\_Phone:\_\_\_\_\_ Company: Email: Yrs. Acquainted: Address: COM OFFICAL USE ONLY: Documentation of Reference check: Date contacted: \_\_\_\_\_ Second Attempt\_\_\_\_ Method of contact: $\Box$ Phone $\Box$ E-mail $\Box$ Fax $\Box$ Letter Notes: Reference Checked by:\_\_\_\_\_ I have read and understand the reference checking policy of Community Outreach Ministries. I voluntarily consent to allow Community Outreach Ministries or any of its officers, representatives, agents, or designees to check references by contacting any person whom they feel to be an appropriate source. I understand that the procedure includes asking questions the company considers relevant concerning my education and work experience.

I authorize investigation of all statements contained in this application. I understand that

wages and salary, be terminated at any time without any previous notice.

Signature:

misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of

Date: \_\_\_\_\_