

# Application for Employment for Jackson Park Baptist Church Preschool

Date of Application: \_\_\_\_\_ Position Applied: \_\_\_\_\_

## Personal Information (please print) Educational Information

|                                                                                                                                                                                                                                                                                                                                                                                                                   |                   |                            |        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------|--------|
| Last Name                                                                                                                                                                                                                                                                                                                                                                                                         | First             | Middle                     | Maiden |
| Permanent Address                                                                                                                                                                                                                                                                                                                                                                                                 |                   |                            |        |
| City                                                                                                                                                                                                                                                                                                                                                                                                              | State             | Zip Code                   |        |
| Temporary Address                                                                                                                                                                                                                                                                                                                                                                                                 |                   |                            |        |
| City                                                                                                                                                                                                                                                                                                                                                                                                              | State             | Zip Code                   |        |
| Home Phone<br>( )                                                                                                                                                                                                                                                                                                                                                                                                 | Work Phone<br>( ) | Cell Phone<br>( )          |        |
| Social Security Number                                                                                                                                                                                                                                                                                                                                                                                            | Birthdate<br>/ /  | NC Driver's License Number |        |
| <p>I swear, under penalty of perjury, that I <b>have not</b> been convicted of a crime, <b>nor</b> have any pending indictments or pending charges, other than a minor traffic violation. _____ (initial)</p> <p>If <b>yes</b>, please explain. (The offense and how recently you were convicted will be evaluated in relation to the job for which you are applying.)</p> <p>_____</p> <p>_____</p> <p>_____</p> |                   |                            |        |
| If hired, can you produce proof of your lawful ability to work in the United States? _____ Yes _____ No                                                                                                                                                                                                                                                                                                           |                   |                            |        |

| Education                           | Name and Location of School | Dates Attended | Did you Graduate? Year? | Subject Studies and Degrees Received |
|-------------------------------------|-----------------------------|----------------|-------------------------|--------------------------------------|
| High School                         |                             |                |                         |                                      |
| College/University                  |                             |                |                         |                                      |
| Graduate or Professional            |                             |                |                         |                                      |
| Vocational or Correspondence School |                             |                |                         |                                      |

List any other skills, knowledge, or qualifications you have related to the job for which you are applying.

\_\_\_\_\_

\_\_\_\_\_

List any child-care training you have completed in the last three years (such as first aid, CPR, SIDS prevention, etc.).

\_\_\_\_\_

\_\_\_\_\_

**Employment Experience (List chronologically, using additional pages if needed)**

|                          |                                                |                                                        |  |
|--------------------------|------------------------------------------------|--------------------------------------------------------|--|
| Current or Last Employer |                                                | Complete Mailing Address                               |  |
| Job Title                | Dates of Employment                            | Phone Number                                           |  |
| Supervisor's Name        |                                                | May We Contact Employer<br>YES                      NO |  |
| Reason For Leaving       | Starting Salary<br>\$                      per | Ending Salary<br>\$                      per           |  |
| Job Description/ Duties: |                                                |                                                        |  |

|                          |                                                |                                                        |  |
|--------------------------|------------------------------------------------|--------------------------------------------------------|--|
| Current or Last Employer |                                                | Complete Mailing Address                               |  |
| Job Title                | Dates of Employment                            | Phone Number                                           |  |
| Supervisor's Name        |                                                | May We Contact Employer<br>YES                      NO |  |
| Reason For Leaving       | Starting Salary<br>\$                      per | Ending Salary<br>\$                      per           |  |
| Job Description/ Duties: |                                                |                                                        |  |

|                          |                                                |                                                        |  |
|--------------------------|------------------------------------------------|--------------------------------------------------------|--|
| Current or Last Employer |                                                | Complete Mailing Address                               |  |
| Job Title                | Dates of Employment                            | Phone Number                                           |  |
| Supervisor's Name        |                                                | May We Contact Employer<br>YES                      NO |  |
| Reason For Leaving       | Starting Salary<br>\$                      per | Ending Salary<br>\$                      per           |  |
| Job Description/ Duties: |                                                |                                                        |  |

Describe any condition that may prevent you from performing certain activities involved in the position for which you are applying (i.e. lifting toddlers, handling an emergency, driving, etc.)

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## Employment References

The names of at least four (4) reference sources. Include current employer if employed, or last employer if not currently employed. References from relatives or persons who can evaluate only your personality and character are **not acceptable**. References who have known you for at least four years and/or are substantially familiar with your educational achievements and work history or performance are preferred.

| Name of Reference | Position/Relationship | Complete Mailing Address | Phone Number | FOR OFFICE USE ONLY |
|-------------------|-----------------------|--------------------------|--------------|---------------------|
| 1.                |                       |                          |              |                     |
| 2.                |                       |                          |              |                     |
| 3.                |                       |                          |              |                     |
| 4.                |                       |                          |              |                     |

## Church Involvement and References

The names of the last three churches you have attended and the length of time you attended there. Include, also, any volunteer or leadership roles you held in that organization, and a reference who can address your participation, personality, and character in that church.

| Name of Church & Town | Volunteer/Leadership Roles | Dates Attended | Reference Name | Reference Phone Number |
|-----------------------|----------------------------|----------------|----------------|------------------------|
| 1.                    |                            |                |                |                        |
| 2.                    |                            |                |                |                        |
| 3.                    |                            |                |                |                        |

In a brief paragraph, please outline your Christian testimony. (You may attach additional pages if needed.)

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