Ministry Council of the Cumberland Presbyterian Church Employment Application

The Ministry Council is a religious organization and reserves the right to make employment decisions on the basis of its religious beliefs. It does not unlawfully discriminate in employment because of age, race, color, national origin, sex, disability, or genetic information.

PERSONAL INFORMATION (Please fill in all information)

Last Name				First Name			Middle N	ame			
Street Address				City, State			Zip Code				
Home Phone				Cell Phone			Work Pho	one			
E-Mail Address		Dri			ver's License # or State ID			'			
Upon employment,	can you show v	verificatio	on of your legal	right to work	in the United St	ates?	Yes	☐ No			
Have you ever been	convicted of a	felony w	hich has not be	en expunged	l or sealed by a c	ourt?	Yes	☐ No			
POSITION							•				
POSITION Position Desired					Salary Desired \$		Date Avai	Date Available			
How were you referre	ed?	Website	Referral (p	provide name	-	<u> </u>				1	
·		ent with	us before? If "Y	es". dates ar	nd position(s)	Yes	. □ No)			
Have you ever applied for employment with us before? If "Yes", of Are you related to any employee of the Cumberland Presbyterian					denomination?						
If "Yes," identify by name and relationship.											
EDUCATION											
SCHOOL NAME CITY, STATE			E	MAJOR COURSE OF STUD			HIGHEST GRADE COMPLETED DIPLOMA/DEGREE				
HIGH SCHOOL									DIPLOM	A/DEGREE	
UNDERGRADUATE					L						
GRADUATE											
POST-GRADUATE											
JOB-RELATED ACTIV	VITIES, HONC	RS, OFF	ICES HELD								
DESCRIBE OTHER JO	OB-RELATED	TRAININ	G COMPLETED)							
	-										
U.S. MILITARY SERVI	CE										
								SPECIAL HONORS/TRAINING			ì
BRANCH/DUTY/LOCATION		MILITARY SPECIALTY			HIGHEST RANK			SERVICE	VICE SCHOOLS ATTENDED		
					1		<u> </u>				
ORK EXPERIENCE (b	egin with cur	rent/mo	st recent posi		A.E.C.			CITY/CT	FATE		
CURRENT EMPLOYER				ADDR	ADDRESS				CITY/STATE		
DLIONE NI IMPED				CLIDE	STIDEDVISOR				MAY WE CONTACT		
PHONE NUMBER				SUPE	SUPERVISOR				MAY WE CONTACT		
DATES EMBI OVED				CTAD	STARTING SALARY				Yes No ENDING SALARY		
	DATES EMPLOYED:				STARTING SALARY						
From		То		\$				\$			
PRIMARY RESPONSIBIL	ITIES										
REASON FOR LEAVING						·			· <u></u>		

EMPLOYER			ADDRESS		CITY/STATE		
PHONE NUMBER		SUPERVISOR		MAY WE CONTACT			
				Yes No			
DATES EMPLOYED:		STARTING SALARY		ENDING SALARY			
From			\$		\$		
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PRIMARY RESPONSIBILITIES							
REASON FOR LEAVING							
EMPLOYER			ADDRESS		CITY/STATE		
PHONE NUMBER			SUPERVISOR		MAY WE CONTACT		
					Yes No		
DATES EMPLOYED:			STARTING SALARY		ENDING SALARY		
From	То		\$		\$		
PRIMARY RESPONSIBILITIES							
REASON FOR LEAVING							
REASON FOR LEAVING							
EMPLOYER			ADDRESS		CITY/STATE		
EWIPLOTER			ADDRESS		CITT/STATE		
DUONE NUMBER			CLIDEDVICOD		MAY WE CONTACT		
PHONE NUMBER		SUPERVISOR		MAY WE CONTACT Yes No			
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DATES EMPLOYED:	т.		STARTING SALARY				
From	То		\$		\$		
PRIMARY RESPONSIBILITIES							
REASON FOR LEAVING							
STATE WHETHER YOU HAVE EVER	BEEN TERM	INATED OR SUSPEN	IDED FROM ANY PREVI	OUS EMPLO	YMENT AND DESCRIBE THE CI	RCUMSTANCES.	
PROFESSIONAL REFERENCES (Th	ree persor		re not related and by				
NAME/ADDRESS		PHONE	OCCUPAT		ION	YEARS KNOWN	
La addition to the Cl. C.	la		and the state of t		to a Marine Alexander Deve		
In addition to the three references a prior to the application deadline.	pove, appli	cants will ensure th	ree signed letters of re	commendati	ion (from three additional peo	pie) are submitted	
	thic applicat	ion is assurate sad	true to the best of	knowlada-	Lundaretand that making	ronrocontations ==	
The information I have provided on this application will be grounds for to			true to the best of my	knowledge.	i understand that making mis	representations on	
Signature (Flectronic Signat			г	Date			