

# La Verne Church of the Brethren Employment Application Form

PLEASE PRINT OR TYPE ALL INFORMATION REQUESTED EXCEPT SIGNATURE

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## APPLICATION FOR EMPLOYMENT

**APPLICANTS WILL BE SUBJECT TO BACKGROUND TESTING**

**PLEASE COMPLETE PAGES 1-4.** DATE \_\_\_\_\_

Name \_\_\_\_\_  

Last
First
Middle
Maiden

Present address \_\_\_\_\_  

Number
Street
City
State
Zip

Telephone (\_\_\_\_) \_\_\_\_\_ Contact/Cell Phone (\_\_\_\_) \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_ Can you work nights? \_\_\_\_\_

When would you be available to begin work? \_\_\_\_\_

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME?       No       Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation (use additional sheets if necessary). \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please mail a completed and signed application to:**  
**Personnel Commission**  
**La Verne Church of the Brethren**  
**2425 E Street**  
**La Verne, CA 91750-4912**

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**APPLICATION FOR EMPLOYMENT**

**Work Experience** Please list your work experience for the **past 10 years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of current/most recent employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. (Use additional sheets in necessary)			

Name of previous employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your Last Job Title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. (Use additional sheets in necessary)			

Name of previous employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your Last Job Title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. (Use additional sheets in necessary)			

MAY WE CONTACT YOUR PRESENT EMPLOYER?     Yes     No

MAY WE CONTACT YOUR PREVIOUS EMPLOYERS?     Yes     No

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APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE?     Yes     No

Please list two character references other than relatives:

Name \_\_\_\_\_

Name \_\_\_\_\_

Position/Company \_\_\_\_\_

Position/Company \_\_\_\_\_

Relationship to you \_\_\_\_\_

Relationship to you \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone (    ) \_\_\_\_\_

Telephone (    ) \_\_\_\_\_

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

**PLEASE READ AND SIGN  
BELOW**

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**PLEASE READ CAREFULLY**

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**APPLICATION FORM WAIVER**

I understand that, in connection with the routine processing of an employment application, the Church may request background information from a variety of sources including criminal and consumer reports.

I understand that prior to an offer of employment I may be required to take a variety of skill tests and a work-style survey.

I further understand that my employment with the Church shall be probationary for a period of one year, and further that at any time during the probationary period or thereafter, my employment relation with the Church is terminable at will for any reason by either party.

**Signature of applicant** \_\_\_\_\_ **Date:** \_\_\_\_\_

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