

Other Training or Course Work completed in the past five years:

Work History – Please provide information on employment history for the past 10 years

1. Current or Last Employer: _____

Address: _____

Job Title: _____

Dates Employed: Start date _____ Ending date _____

Supervisor: _____

Position Responsibilities:

2. Employer: _____

Address: _____

Job Title: _____

Dates Employed: Start date _____ Ending date _____

Supervisor: _____

Position Responsibilities:

3. Employer: _____

Address: _____

Job Title: _____

Dates Employed: Start date _____ Ending date _____

Supervisor: _____

Position Responsibilities:

4. Employer: _____

Address: _____

Job Title: _____

Dates Employed: Start date _____ Ending date _____

Supervisor: _____

Position Responsibilities:

Authorization to Work in the United States

Are you currently authorized to work in the U.S. for any employer? Yes No

In the future, will you require sponsorship for authorization to work in the U.S.?

Yes No

Criminal Offenses – During the past seven (7) years have you been convicted of or pled guilty to a Felony Charge? Yes No

If yes, please explain including the charge, date of offense and conviction, city, state and county where offense occurred.

Military Service

1. Have you served honorably in the Armed Forces of the United States of America on active duty for reasons other than training? Yes No

2. Do you wish to declare a service-connected disability? Yes No

3. At the time of this application, are you the surviving spouse or dependent of a deceased veteran who died from service related reasons? Yes No

4. Do you wish to declare eligibility for veteran’s preference as the spouse of a disabled veteran? Yes No

Restrictions – Are there any restrictions on your ability to work, i.e. revoked license, etc.

Yes No – If yes, please explain:

Certification:

I certify I have given true, accurate and complete information on this form to the best of my knowledge. I understand that employment at House of Prayer is contingent upon favorable results from a background check. In the event confirmation is needed in connection with my work, I authorize this organization to solicit information from my previous employers concerning my qualification. I authorize investigation of all statements made in this application and understand that false information or documentation or a failure to disclose relevant

information may be grounds for rejection of my application, disciplinary action or dismissal if I am employed. I further understand that dismissal upon employment shall be mandatory if fraudulent disclosures are given to meet position qualifications. I understand that if hired I am required to abide by all policies and requirements of House of Prayer Church.

Signature of Applicant

Date