

Application for Employment - Pastor

Applicant Information			
Last Name	First Name	Middle Name	Date
Street Address		Home Phone	Cell Phone
City, State, Zip		Email Address	
Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you member or a Veteran of the armed forces of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, Name of Branch:		Date of Discharge:	
Have you been convicted of a felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain.			
Have you been found guilty of a crime, placed on probation, ordered to do community service, including minor traffic violations? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain.			

Education			
Name of School/College	Complete Mailing Address	Degree	Grad. Date

Professional Licenses/Certifications <small>(Include driver's license information)</small>			
Name	License/Certification #	Date Obtained/Expiration	Name of Issuing Entity

Are you ordained ☐ Yes ☐ No Name of Ordaining Body: _____

Employment Experience <small>(Include all jobs within the last 20 years, add pages if needed)</small>	
Employer Name:	Job Title:
Supervisor Name:	Full Time or Part Time <small>(circle one)</small>
Phone:	Email:
Complete Address:	Employment Dates Start: _____ End: _____
Duties/Responsibilities:	Earnings per Month:
	Reason for Leaving:

Employment Experience	
Employer Name:	Job Title:
Supervisor Name:	Full Time or Part Time (circle one)
Phone:	Email:
Complete Address:	Employment Dates Start: End:
Duties/Responsibilities:	Earnings per Month:
	Reason for Leaving:
Employer Name:	Job Title:
Supervisor Name:	Full Time or Part Time (circle one)
Phone:	Email:
Complete Address:	Employment Dates Start: End:
Duties/Responsibilities:	Earnings per Month:
	Reason for Leaving:

References (Not family members, relatives, or former supervisors)			
Pastor Name:	Title:	Phone:	Email:
Full Address:			
Pastor Name:	Title:	Phone:	Email:
Full Address:			
Church Official Name:	Title:	Phone:	Email:
Full Address:			
Agency Name:	Title:	Phone:	Email:
Full Address:			
Additional Name:	Title:	Phone:	Email:
Full Address:			
Additional Name:	Title:	Phone:	Email:
Full Address:			

As an applicant for the position, I understand and agree that all requested information on the application and supplemental documents are complete and accurate. Any false statements in the application, related documents, or interviews will result in disqualification for employment or termination, if hired. I give Sherry Memorial Christian Church the right to investigate any information provided and secure job related facts in order to be considered for candidacy. I release Sherry Memorial Christian Church from liability for seeking such information. I understand that if selected, I am subject to a thorough reference check, credentials verification, conviction and driver's check.

Applicant Signature: _____ Date: _____