## CHRIST LUTHERAN CHURCH—www.christLutheranroanoke.org Christ Evangelical Lutheran Church, 2011 Brandon Avenue, Roanoke, VA 24015 — Telephone 540-982-8334 Application for Employment

Christ Lutheran Church will comply with all application employment laws. You may attach additional pages if more space is needed to answer any of the following questions.

Your Name				Social Security Number				
Street Address				City/State/Zip				
Home Phone Number				Cell Phone				
Email Address				Alt. Err	ail			
Previous Address (if less than 5 years at current address)				Previou	is City/State/Zip			
Education and Train	ning	_		•				
Indicate most recent lev HS Name, Tech Sch		High	School	College o	r University	Graduate	School Month/Year	
College/University	Name	City/	State		Type of Degr	ee	Degree Awarded	
Additional education, vo	cational or any	military serv	ice that should b	noted:				
	outional of any			Jo notour				
Employment History								
1. Company Name_			Street	Address_				
City		State	Zip	May	we contact? _	Yes	No	
Initial Job Title		Final Job Ti	itle		_ Supervisor N	ame and Title	e	
Start Date	_End Date_		Reason for	Leaving				
Job Duties:								
Your Name (if differen	nt)						_	
2. Company Name_								
City								
Initial Job Title		Final Job Ti	itle		_ Supervisor N	ame and Title	e	
Start Date	_End Date_		Reason for	Leaving				
Job Duties:								
Your Name (if differen							-	
3. Company Name_			Street	Address_				
City								
							9	
Start Date	_End Date_		Reason for	Leaving				
Job Duties:								
Your Name (if differen								

Are you eligible to work in the United States legally. Proof of eligibility will be requiredYesNo	
Are you under 18 years old?YesNo	
Have you ever been convicted of a felony?YesNo	
If yes, indicate date, place, and outcome:	
Which job status would you accept?Full Time Part Time (specify hours)	
Can you perform the essential functions of this position with or without reasonable accommodation?Yes	_No
When are you available to begin work?MonthDayYear	

Licensure, Registration, Certification: (Examples: Teachers Certifications, LPN, RN, CNA, etc.)

SL	Licensure, Registration, Certification	Date Received	Expiration Date	Licensing Agency
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ertific				

**Knowledge, Skills & Abilities:** Please list any special knowledge, skills, or abilities that may be relevant to the position that you are seeking such as computer skills, equipment operation, fluency in languages, etc. Please list any computer programs in which you ar proficient.

Skills & Abilities

**REFERENCES:** Please provide three names and contact information for people who know about your qualifications and are not related to you.

Name	Address	Phone	Professional Relationship

## STATEMENT: (PLEASE READ THIS STATEMENT CAREFULLY BEFORE SIGNING THIS APPLICATION)

I understand that employment with Christ Lutheran Church is at-will, meaning that I or the Church may terminate my employment at any time or for any reason consistent with applicable state or federal law.

I authorize Christ Lutheran Church to make a thorough pre-employment investigation and release all persons, companies, or corporations, including its employees, and officers and agents, from liability for supplying and receiving information as may be requested. I agree to cooperate with Christ Lutheran concerning pre-employment inquires, including but not limited to background checks and criminal records checks. I certify that the statements in the application are true to the best of my belief. I understand that false statements may result in immediate discharge, as well as any penalties where appropriate. I understand that nothing in this application is intended to create a contract, either expressed or implied, for any specific duration.

I understand that the Church requires the successful completion of a drug and/or alcohol test and a thorough criminal background investigation as a condition of employment.

I understand this application will be active for a period of six months; after that time, if I wish to be considered for employment, I must submit a new application. I certify that all the statements in this completed application are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire.

PRINT NAME:		 	 	 
SIGNATURE OF	APPLICANT:_	 	 	 
DATE SIGNED				