



".....touching lives today for eternity"
 A ministry of the First Baptist Church, Brownsville, Texas

FIRST BAPTIST SCHOOL APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on the basis of race, age, sex or national origin.

Date: _____ Social Security Number: _____

Name: _____ Date of Birth: _____
Last First Middle

Present Address _____
Street City State

Phone Number _____ Email address: _____

State name and department of any relatives already employed by the school.

Referred by: _____

Are you employed now? NO _____ YES _____

Employment Desired: _____

Date you can start: _____ Salary Desired: _____

Ever applied to First Baptist School before? NO _____ YES _____

When? _____

EDUCATION:

	Name and Location of School	Circle last year completed	Did you graduate	Subjects studied & Degree(s) earned
High School	_____	1 2 3 4	() Yes () No	_____

College	_____	1 2 3 4	() Yes () No	_____

Trade Business or Corresp. Sch.	_____	1 2 3 4	() Yes () No	_____

CHURCH HISTORY:

Name of church of which you are a member: _____

Church Address: _____ Telephone _____
Street City State

List all previous church work involving youth/children at the above church (list dates and type of work performed):

List (name and address) of *other churches* you have attended regularly during the past five years:

Church Name _____

Address _____ Telephone _____
Street City State

List all previous church work involving youth/children at the above church (list dates and type of work performed):

List all previous *non-church* work involving youth/children:

PERSONAL REFERENCES (Give below the names of three persons not related to you, whom you have known at least one year.)

Reference #1

Name _____

Address _____ Telephone _____
Street City State

Reference #2

Name _____

Address _____ Telephone _____
Street City State

Reference #3

Name _____

Address _____ Telephone _____
Street City State

FORMER EMPLOYERS: List below the last four employers, starting with most recent first.

Month & Year	Name & address of Employer	Salary	Position	Reason for leaving
From _____ To _____				
From _____ To _____				
From _____ To _____				
From _____ To _____				

PHYSICAL RECORD: Do you have any physical condition which may limit your ability to fulfill the duties of the position for which you are applying?

Yes: _____ No: _____

If yes, please explain: _____

In case of emergency notify: _____
Name Relationship (mother, father, etc.)

Address _____ Phone Number _____

Have you ever been accused, charged or convicted of indecency with a child or abuse of a child?

Yes: _____ No: _____

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Applicant's Signature _____ Date _____

First Baptist School is fully accredited by the Association of Christian Schools International (ACSI) and Southern Association of Colleges and Schools (SACS) and does not discriminate on the basis of race, national or ethnic origin, gender, age or disability in its admissions policies or access to its educational, and extracurricular programs and activities



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AUTHORIZATION TO RELEASE REFERENCE INFORMATION

I have made an application for employment at **First Baptist School**. I have authorized the school to thoroughly investigate references, work records, evaluations, education, background checks and other matters related to my suitability for employment.

I authorize references and my former employers to disclose to the school any and all employment records, performance reviews, letters, reports, and other information related to my life and employment, without giving me prior notice of such disclosure.

In addition, I hereby release the **First Baptist School**, my former employers, references, and all other parties from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

I waive the right to ever personally view any references given to **First Baptist School**.

I certify that I have carefully read and do understand the above statements.

Applicant's Name (Print)

Applicant's Signature

Applicant's Social Security Number Applicant's Email Address

Applicant's Driver's License Number & State Issued D.O.B.

Date

Please provide copy of valid Texas Driver's License

NOTARY PUBLIC SIGNATURE

Subscribed and sworn to before me this _____ day of _____ 20 _____

Notary Name: _____ Notary Signature: _____

Notary Public In and For the County of: _____ And the State of: _____