



# Grace United Methodist Church

Pequot Lakes, Minnesota

Date Rec'd: \_\_\_\_\_

## APPLICATION FOR EMPLOYMENT

### PERSONAL INFORMATION

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
(first) (middle) (last)

Address: \_\_\_\_\_  
(street address) (city, state) (zip)

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### EDUCATION & TRAINING

School Name & Location	Years Attended (From - To)	Graduate? (Yes/No)	Major/Subject (if applicable)
High School:			
College/University:			
College/University:			
Highest Degree Earned: 1. High School 2. Associate 3. Bachelor 4. Master (Circle only one)			
Additional special skills:			
Are you first-aid/CPR certified? YES NO (Circle one)		Date of Certification:	

Why do you want to work with children?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any talents, additional training, or other information that would help you in this position:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## EMPLOYMENT INFORMATION

<b>Company Name:</b>		Dates of Employment:
Address (Include Street, City, State, Zip Code):		Phone Number:
Job Title:	Description of Job Duties:	
Supervisor (Name & Title):		

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Address (Include Street, City, State, Zip Code):		Phone Number:
Job Title:	Description of Job Duties:	
Supervisor (Name & Title):		

## REFERENCES

Please list at least **two** professional references that we may contact.

NAME	ADDRESS	PHONE
Reference 1:		
Reference 2:		
Reference 3:		

I understand that my employment is contingent on the completion of a criminal history check, and Grace United Methodist Church has the right to not hire or terminate employment based on the findings of the background check.

\_\_\_\_\_  
Initials

The information contained in this application is correct to the best of my knowledge. I authorize any former employers, references or organizations listed in this application to give any information that they may have regarding my character and fitness for working with children. I release all such references from liability for any damages or claims that may result from furnishing such evaluations. I understand that any omission of material fact on this application may be grounds for rejection of this application.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

*Completed applications can be dropped off at Grace United Methodist Church (29432 Patriot Ave, Pequot Lakes, MN 56472) on Monday through Friday from 9:15 AM to Noon, or on Sundays from 8:30 to 10:30 AM. Applications can also be emailed to Andrea Langhoff at [andreaatgrace@tds.net](mailto:andreaatgrace@tds.net).*