

EMPLOYMENT APPLICATION

PLEASE PRINT

St. Luke's United Methodist Church
8817 South Broadway, Highlands Ranch, Colorado 80129

AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions on the basis of qualifications and without regard to race, color, religion, sex, national origin, age, martial status, veteran status, disability, sexual orientation, use of lawful products during non-work hours and any other legally protected status.

Position(s) Applied For: _____ Date You Can Start: _____

Name: _____
Last Name First Name Middle Name

Current Address: _____ Since Date _____
Number and Street City State Zip Mo Year

If you have not lived at your current address for at least two years, please list below all other address you have had for the past two years. (If more than two addresses, please list on a separate sheet of paper and attach hereto)

Address	Date
Address	Date

Home Telephone: _____ Work Telephone: _____ Cell Telephone: _____

Please list all other names you use or have used and approximate dates of use including maiden name, if applicable. (If more than two, list on a separate sheet of paper and attach hereto)

Name	Date
Name	Date

Are you available to work: Full-time Part-time Temp Weekdays Weekday Evenings Weekends

If you did not check "full-time", indicate below what day(s) and hour(s) you are available for work:

EDUCATION:

	School Name	Location	Diploma	Major Course of Study
Elementary School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Technical School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other:			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Summarize special skills and training not listed above:

Describe honors received:

List professional, trade, business, church or civil activities and leadership positions held. (You may exclude memberships which may reveal sex, race, religion, national origin, age, or disability or other protected status):

EMPLOYMENT EXPERIENCE:

Start with your present or most recent position. If information is already on your attached resume, fill in only those items not listed on your resume (i.e., reason for leaving, salary, etc.). If any employment was under a different name, indicate name _____.

Present or Most Recent Employer: _____ Telephone: _____

Address: _____
Number and Street City State Zip

Position(s) held: _____ Duties: _____

Dates of Employment: From _____ To _____ Annual Salary: _____
Month / Year Month / Year

Supervisor: _____ Department: _____
 Full-Time
 Part Time
Hours per week _____

Reason for Leaving: _____

Employer: _____ Telephone: _____

Address: _____
Number and Street City State Zip

Position(s) held: _____ Duties: _____

Dates of Employment: From _____ To _____ Annual Salary: _____
Month / Year Month / Year

Supervisor: _____ Department: _____
 Full-Time
 Part Time
Hours per week _____

Reason for Leaving: _____

Employer: _____ Telephone: _____

Address: _____
Number and Street City State Zip

Position(s) held: _____ Duties: _____

Dates of Employment: From _____ To _____ Annual Salary: _____
Month / Year Month / Year

Supervisor: _____ Department: _____
 Full-Time
 Part Time
Hours per week _____

Reason for Leaving: _____

May we contact your present and/or past employer for references?

Present Employer Yes No _____ Past Employer(s) Yes No _____

SPECIAL SKILLS AND QUALIFICATIONS:

Summarize special job-related skills and qualifications acquired from employment or other experience not listed above:

REFERENCES:

Please list three personal, business or church references who are not related to you.

1. Name: _____ Phone Number: _____

Address: _____
Street City State Zip

2. Name: _____ Phone Number: _____

Address: _____
Street City State Zip

3. Name: _____ Phone Number: _____

Address: _____
Street City State Zip

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

2. Have you ever applied for a position at St Luke’s before? Yes No
If yes, please give date: _____

3. Have you ever been employed by St. Luke’s before? Yes No
If yes, please give dates of employment: From _____ To _____
Mo/Yr Mo/Yr

4. Are you legally qualified to work in the United States? Yes No
(You will be required to complete I-9 Employment Eligibility Verification Form)

5. Have you ever been disciplined for or convicted* of sexual misconduct, sexual harassment, child abuse or any crime involving actual or attempted sexual molestation of a minor? . . . Yes No
If yes, explain below or attach additional page(s): _____

6. Have you ever been convicted* of a traffic offense? Yes No
If yes, explain below or attach additional page(s) (a conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered)

7. Have you ever been convicted* of a felony or misdemeanor (other than a misdemeanor traffic offense or traffic infraction)? . . Yes No
If yes, explain below or attach additional page(s) including offense, conviction date, court and location:

* For purposes of this question, “convicted” is defined as the occurrence of **ANY** of the following in connection with a criminal charge:

- 1. A finding of guilty by a jury or court.
- 2. Payment of a fine.
- 3. A court’s imposition of a deferred or suspended sentence.
- 4. A court’s acceptance of a plea of guilty or a plea of nolo contendere.
- 5. Forfeiture of a bail, bond or other security deposited to secure a defendant’s appearance.
- 6. A court’s approval of an agreement for a deferred prosecution.

8. Have you ever had any job-related training in the US Military Service?. . . . Yes No
If yes , explain when and the training received _____

9. Are you able to perform the essential requirements of the job for which you are applying? Yes No
If no, are there reasonable accommodations that can be made to allow you to perform the essential functions of the job?

Explain: _____

State any additional information you feel may be helpful to us in considering your application:

I hereby affirm under penalty of perjury under the laws of the Sate of Colorado that the information included in this employment application is true, correct and complete to the best of my knowledge. I hereby authorize St. Luke's United Methodist Church (St Luke's) to verify its accuracy and to obtain reference information on my work performance. I hereby release St. Luke's from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

Further, I understand that, as a condition of me being considered for employment by St. Luke's, St. Luke's may obtain various reports that include, but are not limited to, my criminal and civil history, education and experience, reference checks, Department of Motor Vehicle records, and other public records bearing on my fitness to be employed by St. Luke's.

Further, I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules, and regulations of employment of St Luke's. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offer is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant _____ Date Applied _____

This application for employment is good for 90 days only. Consideration for employment after 90 days will require a new application.

FOR EMPLOYER USE ONLY

Interviewed by: _____ Date: _____ Remarks: _____

Hired: Yes No Position: _____

Starting Salary/Wage \$ _____ Hour Month Annual Date Reporting to Work _____ 200__
Mo Day Yr

Salary Classification:

- Salaried/Exempt from overtime
- Hourly, not exempt from overtime

Benefits Group Classification:

- Full Time (35 hours thru 40 hours per week)
- Part-Time I (13 thru 34 hours per week)
- Part-Time II (0 thru 12 hours per week)

Approved: _____
Immediate Supervisor) Date

Department Head _____
Date

Senior Pastor _____
Date

Staff-Parish Relations Team Leader _____
Date

Are the following required employment forms attached:

- 1.** Form I-9 Employment Eligibility Verification. Yes No Initials _____
- 2.** W-4 Employee's Withholding Allowance Certificate . . Yes No Initials _____
- 3.** I understand (Nursery and childcare workers only) Yes No Initials _____