

Application for Employment Hope Lutheran Church PLEASE PRINT

Name & Address:

Last	First	Middle	Nickname
------	-------	--------	----------

Street	City, State	Zip Code
--------	-------------	----------

Mobile Phone: _____ Home Phone: _____

Email: _____

Current Church Affiliation: _____

Position(s) of service or leadership held in that church: _____

Have you ever been employed by Hope before? _____

POSITION APPLIED FOR:

Date of Application

Date you are available to begin work: _____

Because we are a church body, The Lutheran Church—Missouri Synod, we retain the right to give preference in hiring to persons who are members in good standing of an LCMS congregation.

BUSINESS/PROFESSIONAL REFERENCES

Please list three professional references of individuals to whom you are **not** related.

Name	Business Relationship	Phone or Email	Yrs Acquainted

**Application for Employment
Hope Lutheran Church
PLEASE PRINT**

EMPLOYMENT EXPERIENCE

Please list your last three employers, assignments, or volunteer activities, including any military experience, starting with the most recent:

MOST RECENT EMPLOYER:

Employer _____ Phone: _____

Address: _____
Street Address City State Zip Code

Job Title _____ Supervisor's Name _____

Dates Employed: From: _____ Until: _____

If you are currently working for this employer may we contact them? Yes No

If no, reason for leaving _____

.....

Employer _____ Phone: _____

Address: _____
Street Address City State Zip Code

Job Title _____ Supervisor's Name _____

Dates Employed: From: _____ Until: _____

Reason for leaving _____

.....

Employer _____ Phone: _____

Address: _____
Street Address City State Zip Code

Job Title _____ Supervisor's Name _____

Dates Employed: From: _____ Until: _____

Reason for leaving _____

Application for Employment Hope Lutheran Church PLEASE PRINT

Have you ever been involuntarily terminated or asked to resign from any job? Yes No

Please explain any gaps in your employment history: _____

General Information

Are you legally eligible to work in the United States?

Are you 18 years or older? Yes No

If not, prior to your start date you must provide a work permit, which is available through your high school.

Are you able to perform the essential job functions of the job for which you are applying with or without reasonable accommodation? Yes No

Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for qualified applicants/employees to perform essential job functions.

Educational Experience

Highest Level of Education _____

Diploma/Degree (if any) _____

List any additional training, job skills, or experience you have that qualifies you for the position you are seeking, including professional licensures or certifications. If you would like to include a résumé, please attach it to this application.

**Application for Employment
Hope Lutheran Church
PLEASE PRINT**

Please describe why you feel the Lord is calling you to this position:

APPLICANT’S STATEMENT

I understand and agree that any misrepresentation by me in this application will be grounds for immediate termination if I have been employed. I give Hope Lutheran Church the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability Hope Lutheran Church for furnishing such information. I understand that a criminal background check will be conducted on me as part of the employment process, and I consent to any such check. I also understand that I may be required to have a physical examination, including drug screen.

Should employment result from this: I understand that I will be required to provide documentation to establish identity and employment eligibility. I understand that I will be free to resign at any time and that I will be an at-will employee of Hope Lutheran Church. Hope Lutheran Church reserves the right to terminate employment at any time, with or without cause and without prior notice. I understand that no representative of Hope Lutheran Church has the authority to make any assurances to the contrary. Furthermore, I agree to abide by the ministry guidelines and requirements of Hope Lutheran Church and to refrain from any unscriptural conduct in the performance of my services on behalf of the church. I hereby attest that I am of good moral character.

Signature of Applicant

Date

Please return this application to the Church Office or directly to Bev Janosky. All applicants will be contacted, but not necessarily interviewed.

This application for employment shall be considered active for a period of time not to exceed 6 months.

Application for Employment Hope Lutheran Church PLEASE PRINT

Equal Employment

The Lutheran Church—Missouri Synod and its related entities, Hope Lutheran Church, are in agreement with the civil rights laws of this country. We, as employers, are generally exempt from the provision of the Civil Rights Act of 1964, which forbids discrimination in employment based on religion; therefore, we retain the right to give preference in the hiring of persons who are Christian, and/or members in good standing of LCMS congregations.

Beyond this religion exception, it is our employment practice under the Civil Rights Act of 1964, not to discriminate in hiring, training, compensating, promoting or terminating employees because of an individual's race, color, sex (except where ministers of religion are required), pregnancy, age, national origin, ancestry, physical or mental disability, severe/morbid obesity, medical condition, military or veteran status, genetic information, marital status, ethnicity, alienage or any other protected classification, in accordance with applicable federal, state, and local laws. The Organization takes allegations of discrimination, intimidation, harassment and retaliation very seriously and will promptly conduct an investigation when warranted.

Equal employment opportunity includes, but is not limited to, employment, training, promotion, demotion, transfer, leaves of absence, and termination.