First United Methodist Church of Eureka Springs 195 Huntsville Road Eureka Springs, AR 72632 479-253-8987

EMPLOYMENT APPLICATION

Today's Date				
Name:				
Last	First	Midd	lle	
Are you over the age of 18? $_$ Yes				
Present Address:		:		
State: Zip:				
Home Phone:				
Email Address:				
Position applying for:				
Date you are available to start:				
employment. This is not an employ completely and accurately. False o form are grounds for terminating t terminating employment. First Unidoes not discriminate against any agender, national origin, age, disabi protected by federal, state, or loca employment. Additional testing of may be required prior to employm	r misleading statem he application proce ted Methodist Chur applicant or employ lity, veteran status, I law. A conviction v job-related skills an	ents during the ess or, if discove ch is an equal o ee because of racitizenship or a will not necessal	interviewered after pportunitace, color other or interesting to the color interesting to the color of the col	and on this employment, y employer and , religion, characteristic applicant from
Qualifications:				
 Please circle highest grade of the second sec	•			
Name	City/State	Gra	duated	Degree Type
High School		Yes	No	<u> </u>
College		Yes	No	

Yes No

Other

		s taken, dates of completion)
Name of Scho	ol	Course	Date
	I		
3 Professional o	rganizations: (List any in wh	ich vou have membershin)	
Name of orga		ions held	Dates
rtuille of organ			Dutes
4. Previous Empl	oyers- PLEASE NOTE: Your a	pplication may not be consid	dered unless every
		we will make every effort to	
		rs of past employers are criti	
- 1 - 1 - 1		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
lost Recent Employer		currently working for this em	iployer?
	YesNo If yes, Ma	y we contact?	
			
mpany Name	City	State	
om <u>To</u>			
tes Employed	Job Title	Supervisor Name	
ties			
ason for Leaving			
econd Most Recent Emp	loyer		
			
mpany Name	City	State	
om <u>To</u>			
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ason for Leaving			

ird Most Recent Emplo	oyer		
npany Name	City	State	
mToes Employed	 	Supervisor Name	
ies			
son for Leaving			
held and list t	he duties you performed nd phone number of the	list any relevant volunteer po in each position, the name o volunteer organization, and t	f your supervisor,
Name of Orga	nization	Positions held	Dates
felony (includ violence, thef If yes, please 7. References: P	ing but not limited to dru t, or motor vehicle violat explain: lease list three individual	ed guilty to a crime, either a rig-related charges, child abustions)? No Yes s who are not related to you have known you for at least to	e, other crimes of by blood or marriage
	·	·	,
1. Name:			
Daytime Phone:			
Evening Phone:			
2. Name:			
Daytime Phone:			
Evening Phone:			

Length of time you have known reference:	
Relationship to reference:	
3. Name:	
Address:	
Daytime Phone:	
Evening Phone:	
Length of time you have known reference:	
Relationship to reference:	
Waiver and Consent:	
I,, hereby certify that the information I	have provided on
this application for employment is true and correct. I authorize this church t	to verify the
information I have provided on this application by contacting the references	
have listed, by conducting a criminal records check, or by other means, inclu	ding contacting
others whom I have not listed. I authorize the references and employers list	ed in this
application to give you whatever information they may have regarding my cl	haracter and fitness
for the job for which I have applied. Furthermore, I waive any rights I may h	ave to
confidentiality.	
In the event that my application is accepted and I become employed by First Church, I agree to abide by and be bound by the policies of First United Metl to refrain from inappropriate conduct in the performance of my duties on be Methodist Church.	hodist Church and
In consideration of my employment, I agree to conform to First United Meth	odist Church's
policies and regulations, and I agree that my employment and compensation	າ can be
terminated, with or without cause, and with or without notice, at any time, a	•
United Methodist Church's option. I also understand and agree that the term	
my employment may be changed, with or without cause and with or without	
time by First United Methodist. I understand that no First United Methodist	•
other than both the Chair of SPRC and the Pastor, and then only in writing w	
understanding specifically set forth, and signed by the Pastor and myself, ha	
enter into any agreement for employment for any specific period of time, or	to make any
agreement contrary to the foregoing.	
I have read this waiver and the entire application, and I am fully aware of its	contents.
Signature of Applicant	Date