McGREGOR BAPTIST CHURCH
3750 Colonial Boulevard
Fort Myers, FL 33966
T 239.936.1754
F 239.936.6545

Dear Applicant,

Thank you for your interest in employment at McGregor Baptist Church and for taking the time to fill out your application.

Please make sure that you fill out your application completely.

You must specify the exact position that you are applying for, or your application cannot be forwarded to the appropriate department on your behalf.

If the department that you are applying for is interested, someone will contact you within two (2) weeks. Otherwise, you will not hear back from us.

Once again, thank you for your interest in McGregor Baptist Church and we pray that God will truly bless you in your career endeavors.

Sincerely,

Kim Hopkins
HR Director

# APPLICATION FOR EMPLOYMENT

Date — We Are An Equal Opportunity Employer — Please Print

Last Name | First Name | Middle Initial

Phone Number | Rate of Pay Expected $ Per

Address | City | State | Zip Code

Position of Work Applying for

## GENERAL INFORMATION

Are you applying for Full Time ☐ Part Time ☐ or Temporary ☐

What days and hours are you available to work? _____

On what date are you available to start work? _____ Are you willing to work overtime? _____

What language(s) do you speak, read or write fluently? _____

If hired, can you verify that you have the legal right to work in the United States? Yes ☐ No ☐

Are you presently on layoff from another job and subject to recall? Yes ☐ No ☐

If so, please explain _____

Have you ever served in the Armed Forces? Yes ☐ No ☐ If so, what branch? _____

Do any of your relatives work for this church? Yes ☐ No ☐ If so, who? _____

Have you ever been arrested? If yes, please explain. Yes ☐ No ☐

Have you ever been convicted of a criminal offense? Yes ☐ No ☐
If yes, please state the nature of the offense, where the offense occurred, date and sentence imposed:
(NOTE: Conviction will not necessarily disqualify applicant)

Do you have any certificates or licenses which may help you qualify for employment? (provide copy) Yes ☐ No ☐

Have you ever held a child care license with the Dept. of Children & Families or been registered to provide child care in you home? (If yes, please identify where & when license was held & what program the license was for. (Please use a separate sheet of paper) Yes ☐ No ☐

While employed in a child care program, have you ever been the subject of disciplinary action, or been the party responsible for a child care facility receiving an administrative fine? (If yes, please explain) Yes ☐ No ☐

Have you ever worked in a facility that has had a license denied, revoked or suspended in any state or jurisdiction or has been the subject of a disciplinary action or been fined while employed in a child care facility? If yes, please explain. Yes ☐ No ☐

## EDUCATION BACKGROUND

| Type of School | Name and Address | How many years attended | Graduated | Course or Major |
|---|---|---|---|---|
| High School | | | Yes ☐ No ☐ | |
| College | | | Yes ☐ No ☐ | |
| Post Graduate | | | Yes ☐ No ☐ | |
| Business or Seminary | | | Yes ☐ No ☐ | |
| Other | | | Yes ☐ No ☐ | |

# EMPLOYMENT EXPERIENCE

Please start with your most recent job and include all periods of employment, self-employment, job-related military service and volunteer work.

| From<br>To | Employer's Name/Address/Telephone | Start Pay<br>Last Pay | Job Title<br>Reason for Leaving |
|---|---|---|---|
| Describe the Work Performed | | | |

| From<br>To | Employer's Name/Address/Telephone | Start Pay<br>Last Pay | Job Title<br>Reason for Leaving |
|---|---|---|---|
| Describe the Work Performed | | | |

| From<br>To | Employer's Name/Address/Telephone | Start Pay<br>Last Pay | Job Title<br>Reason for Leaving |
|---|---|---|---|
| Describe the Work Performed | | | |

| From<br>To | Employer's Name/Address/Telephone | Start Pay<br>Last Pay | Job Title<br>Reason for Leaving |
|---|---|---|---|
| Describe the Work Performed | | | |

May we contact the employers listed above? Yes ☐ No ☐ If not, please indicate which ones you do not wish us to contact.

# PERSONAL REFERENCES

Please do not list relatives or former employers.

| | Name and Occupation | Address | Phone Number |
|---|---|---|---|
| 1. | | | |
| 2. | | | |
| 3. | | | |

# CERTIFICATION AND ACKNOWLEDGEMENT

I certify that the information provided herein is true and correct to the best of my knowledge. I understand that, if employed, falsified statements on this Application for Employment form will be considered grounds for termination.

I authorize the church to thoroughly investigate my work experience and any other matters related to my suitability for employment. I further authorize my former employers to disclose to the church any and all information they may have concerning my previous employment. In addition, I hereby release the church, my former employers, and all other persons from any and all claims, demands, or liabilities arising out of, or in any way related, to such disclosure.

I acknowledge that, prior to or during my employ, the church may require any legal testing and/or examination, including, but not limited to, medical, physical, drug and/or alcohol, psychological, and skill and aptitude.

I also acknowledge that, if employed, both the church and I have the right to terminate the employment relationship at any time, with or without cause or advance notice. This employment at will relationship will remain in effect throughout my employment with the church and may not be modified by any oral or implied agreement. I also acknowledge that I have been shown my employee rights under Fair Labor Standards Act (FLSA).

| Applicant's Signature | Date |
|---|---|
| | |

# McGregor Baptist Church
# Background Check Authorization

Area of Ministry/ Service: _____

Print Name: _____
(First) (Middle) (Last) (Maiden) Year Married

Former Name(s) and Dates Used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____ Date of Birth: _____

Telephone Number: _____

Drivers License Number/State: _____

Are you a member of McGregor Baptist Church? YES Since: NO
*(Please circle)*

The information contained in this application is correct to the best of my knowledge. I hereby authorize McGregor Baptist Church and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to McGregor Baptist Church or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I hereby release McGregor Baptist Church, the Social Security Administration, and its agents, officials, representative, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

Signature: _____ Date: _____

**CHURCH AFFILIATION:**

Current Church Membership at _____ Denomination _____

Number of Years attended _____

Pastor's Name _____ Phone Number _____

Are you active there? _____ In what capacity? _____

Have you made the decision to accept Jesus as your Lord and Savior? Yes ☐ No ☐

PLEASE WRITE YOUR SALVATION EXPERIENCE & SPIRITUAL GROWTH:

_____

_____

_____

_____

_____

_____

What is your favorite scripture? _____

_____

What is God doing that is special in your life? _____

_____

_____

_____

Do you have an active Prayer Life? _____