

FIRST UNITED METHODIST-LOS ALAMOS
LAY WORKERS APPLICATION

Name: _____ Address: _____
City: _____ State: _____ Zip Code: _____
Phone: Home: _____ Cell Phone: _____ Email: _____
Social Security Number: _____ Date of Birth: _____ Dr Lic _____

JOB RELATED

What strengths do you have that make you perfect for the position? _____

Are there any time restraints that would keep you from performing this job? _____

Do you have time flexibility for the job? Explain _____

What weaknesses in experience might you have that we can assist you in developing to become successful in this position?

EMPLOYMENT HISTORY (5 year) attach additional page if necessary

Present Employment: _____
Work Address: _____ Phone: _____
Employment Dates: _____ Supervisor: _____
Past Employment: _____
Work Address: _____ Phone: _____
Employment Dates: _____ Supervisor: _____
Past Employment: _____
Work Address: _____ Phone: _____
Employment Dates: _____ Supervisor: _____

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Is there any reason that you do not want an employer contacted? _____

REFERENCES— Please list names and phone numbers of people familiar with your character as it relates to your recent work experience. References will be contacted.

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

PERSONAL QUESTIONS

1. Do you use illegal drugs? Yes No
2. Have you ever been convicted of a criminal offense?
(If yes, explain below) Yes No

3. Have you ever been charged with child abuse, neglect or molestation?
(If yes, explain below) Yes No

4. Has your driver's license ever been suspended or revoked? Yes No
5. Other than the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the position? Yes No

I Understand That:

The information that I have provided may be verified, if necessary, by contacting persons or organizations named in this application, or by contacting any person or organization that may have information concerning me. I hereby release and agree to hold harmless from liability any person or organization that provides such information. I also agree to hold harmless the Diocese of Upper South Carolina, its congregations, and the officers, employees, and volunteers thereof in seeking such information.

This document does not constitute an employment relationship

Affirmation

In signing this application, I affirm that the information I have provided is true and correct.

Signature _____

Date _____