



SEVENTH-DAY  
ADVENTIST  
CHURCH

Telephone: (559) 347-3000

Central California  
Conference

# Application For Employment

We consider applicants for all positions without regard to race, color, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status other than religion.

(PLEASE PRINT)

Date of Application \_\_\_\_\_

Position(s) Applied For \_\_\_\_\_

Referral Source: ☐ Advertisement ☐ Friend ☐ Relative ☐ Walk-in

☐ Other \_\_\_\_\_

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Address \_\_\_\_\_  
NUMBER STREET CITY STATE ZIP CODE

Telephone ( ) \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Area Code

Religious Affiliation, if any: \_\_\_\_\_

Name of Local Congregation, if any: \_\_\_\_\_

If under 18, can you, after employment, submit a work permit? ☐ Yes ☐ No

Have you filed an application here before? ☐ Yes ☐ No If Yes, give date \_\_\_\_\_

Have you ever been employed here before? ☐ Yes ☐ No If Yes, give date \_\_\_\_\_

Are you employed now? ☐ Yes ☐ No May we contact your present employer? ☐ Yes ☐ No

Are you prevented from lawfully becoming employed  
in this country because of Visa or Immigration Status? ☐ Yes ☐ No  
(Proof of citizenship or immigration status will be required upon employment.)

On what date would you be available for work? \_\_\_\_\_

Are you available to work ☐ Full Time ☐ Part-Time ☐ Temporary

Are you on a lay-off and subject to recall? ☐ Yes ☐ No

Can you travel if a job requires it? ☐ Yes ☐ No

Have you ever been convicted of a felony? ☐ Yes ☐ No  
(Conviction will not necessarily disqualify applicant from employment.)

If Yes, please explain

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# Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities. For former military service assignments, you need not provide the type of discharge you received. You may exclude information which indicates your race, color, gender, national origin, handicap or other protected status.

1	EMPLOYER	TELEPHONE	DATES EMPLOYED		WORK PERFORMED
	( )		FROM	TO	
	ADDRESS				
	JOB TITLE	HOURLY RATE/SALARY			
		STARTING	FINAL		
	SUPERVISOR				
	REASON FOR LEAVING				
2	EMPLOYER	TELEPHONE	DATES EMPLOYED		WORK PERFORMED
	( )		FROM	TO	
	ADDRESS				
	JOB TITLE	HOURLY RATE/SALARY			
		STARTING	FINAL		
	SUPERVISOR				
	REASON FOR LEAVING				
3	EMPLOYER	TELEPHONE	DATES EMPLOYED		WORK PERFORMED
	( )		FROM	TO	
	ADDRESS				
	JOB TITLE	HOURLY RATE/SALARY			
		STARTING	FINAL		
	SUPERVISOR				
	REASON FOR LEAVING				
4	EMPLOYER	TELEPHONE	DATES EMPLOYED		WORK PERFORMED
	( )		FROM	TO	
	ADDRESS				
	JOB TITLE	HOURLY RATE/SALARY			
		STARTING	FINAL		
	SUPERVISOR				
	REASON FOR LEAVING				

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications  
Summarize special skills and qualifications  
acquired from employment or other experience.


Indicate languages besides English you speak, read, and/or write.

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

List professional, trade, business or civic activities and offices held.

(You may exclude memberships which would reveal your sex, race, national origin, age, ancestry, or handicap or other protected status other than religion):

[illegible]

Give name, address and telephone number of three references who are not related to you and are not previous employers.

[illegible]

# Education

	Elementary					High				College/University				Graduate/ Professional			
School Name																	
Years Completed/Degree	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																	
Describe Course of Study:																	
Describe Specialized Training, Apprenticeship, Skill and Extra-Curricular Activities																	

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

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## Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. If I wish to be considered for employment beyond this time period, I will inquire as to whether or not applications are being accepted at that time.

I understand that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that effect is executed by the employer and me in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

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Signature of Applicant

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Date

## For Personnel Department Use Only

Arrange Interview ☐ Yes ☐ No

Remarks \_\_\_\_\_

INTERVIEWER, DATE

Employed ☐ Yes ☐ No

Date of Employment \_\_\_\_\_  
Hourly Rate/

Job title \_\_\_\_\_ Salary \_\_\_\_\_ Department \_\_\_\_\_

By \_\_\_\_\_  
NAME AND TITLE DATE