

## **APPLICATION FOR EMPLOYMENT**

First Name	Last	
Address	City	Zip
Phone Number		
Email		
Are you a U.S. Citizen? Yes	No	
If not a U.S. Citizen, do you hav	ve legal rights to remain & work in the U.	S.? Yes No
Position applying for		
Date available for work	Would you accept tempor	rary work?
Salary requirement		
	Pho	
	Date Ended	
Reason for leaving		
Company Name		
	Pho	
Supervisor		May we contact
Job Title & Duties		
	Date Ended	
Reason for leaving		

120 Stevens Avenue, Solana Beach, CA 92075 (858) 509-2580 / Fax (858) 509-2592

## TESTIMONY

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How does Jesus Christ impact your daily life?

Are there any restrictions or special needs which require accommodations?

Why are you interested in working for us?

How were you referred to our church?

## PERSONAL REFERENCES

Please give names of three adults (over 18) outside of your family who know you and would recommend you to work at Solana Beach Presbyterian Church.

Name		
Email	Relationship	
Name		
Email	Relationship	
Name		
Email	Relationship	

Equal and fair consideration shall be given to every individual applying to the church for employment. Selection of employees is based upon the qualifications and experience of the individual. Solana Beach Presbyterian Church is an at-will employer and as a result we may sever employment at any time with or without cause.

□ I authorize the Solana Beach Presbyterian Church to obtain information concerning me from former employers and others, and I release all concerned from any liability in connection therewith. I further understand that any false statements or misrepresentations made by me on this application or any supplement hereto will be sufficient grounds for immediate dismissal.

CALIFORNIA PUBLIC RECORDS DISCLOSURE I acknowledge that in connection with my application for employment or subsequent employment, The Company may collect, assemble, evaluate, compile, report, transmit, transfer or communicate information on my character, general reputation, personal characteristics or mode of living which are matters of public record without using a third-party investigative consumer reporting agency. Matters of public record are defined as records documenting an arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment. I understand that such public record information generally must be disclosed to me within seven days of the date the information is received, regardless of whether it is received orally or in writing. I understand that I may waive my right to receive such information.

By checking this box I hereby waive my right to any such disclosure.

Signature: \_\_\_\_\_

Date: