

FWB FAMILY MINISTRIES APPLICATION FOR EMPLOYMENT

No possession of tobacco, alcohol products, firearms or weapons permitted on campus.



FWBFM is a not-for-profit Christian Ministry. We are owned and operated by the TN State Association of Free Will Baptists and licensed by the TN Dept. of Children's Services. All statements made by applicants for employment on this application form will be checked for accuracy. We offer equal employment opportunities to all persons without discrimination on the basis of race, color, religion, age, sex, national origin, citizenship status, physical or mental disability, or past, present, or future service in the Uniformed Services of the U.S., or any other legally protected status. The use of this form does not mean there are positions open and does not obligate us in any way. FWBFM does not pay unemployment wages.

Last Name First Middle

Address City State Zip Code

Telephone Number(s)

Person to notify in case of an emergency: _____
Name Relationship Phone # (include area code)

Are you at least 21 years of age? ___ Yes ___ No (Employment is subject to verification of state required age.)

Can you produce documented proof of your identify and eligibility for employment in the United States? ___ Yes ___ No
(Examples: Social Security card, driver's license, birth certificate, and/or Immigration and Naturalization Service Documents)

Religious Affiliation (denomination) _____

Church you attend: _____ How frequent? _____
Approved by Civil Right Act of 1964 Title VII Section 702

Do you use tobacco products? ___ Yes ___ No

Do you use alcohol products? ___ Yes ___ No

Position(s) applying for: _____ Salary ___ Hourly ___

Salary or wages desired: \$ _____ hr./week

Have you applied for a job with us before? ___ Yes ___ No

Have you worked for us before? _____ If yes, when? _____ Position _____

If considered for employment, what date will you be available for work? _____

If hired will you work extra time if required? ___ Yes ___ No

How were you referred to our agency? _____

Have you ever been discharged or requested to resign from a position? ___ Yes ___ No

If yes, please explain _____

Have you ever been bonded? ___ Yes ___ No

Have you ever been refused a bond? ___ Yes ___ No

If yes, state reason and date _____

Have you ever held a position of trust (handling money or confidential material)? ___ Yes ___ No

If yes, describe _____

Have you ever been convicted of a crime (excluding misdemeanors and traffic offenses)? ___ Yes ___ No

If YES, list convictions: (A conviction does not necessarily disqualify the applicant for the position being applied for).

Have you ever been listed on State Abuse Registries? ___ Yes ___ No

If YES, list registries _____

Are there any other experiences, skills, or qualifications, which have prepared you to work with our organization? _____

Education

Type of School	Name & Address	Courses Majored In	Circle Last Year Completed	Graduate? Show Degree
Elementary/Middle			5 6 7 8	
High School			9 10 11 12	
College			1 2 3 4	
Post Graduate				

If you are applying for a position which by law requires a college, high school or GED education, you must provide proof of diploma and/or transcript.

EMPLOYMENT HISTORY (Start with most recent/current employer)

Name: _____ From: _____ To: _____

Address: _____ Position: _____

Duties: _____ Starting salary/wages: _____

Final salary/wages: _____

Reason for leaving: _____ Supervisor: _____

May we contact this employer &/or supervisor: ___ yes ___ no Phone: _____

Name: _____ From: _____ To: _____

Address: _____ Position: _____

Duties: _____ Starting salary/wages: _____

Final salary/wages: _____

Reason for leaving: _____ Supervisor: _____

May we contact this employer &/or supervisor: ___ yes ___ no Phone: _____

Name: _____ From: _____ To: _____

Address: _____ Position: _____

Duties: _____ Starting salary/wages: _____

Final salary/wages: _____

Reason for leaving: _____ Supervisor: _____

May we contact this employer &/or supervisor: ___ yes ___ no Phone: _____

MILITARY SERVICE:

Branch of Service: _____ **From:** _____ **To:** _____

Rank: _____ **Duties:** _____

References-your Pastor, 1 Bank & 3 Personal-do not list relatives (please print or type, give complete mailing address)

NAME & ADDRESS	TELEPHONE	YEARS KNOWN
_____	() _____	_____
_____	() _____	_____
_____	() _____	_____
_____	() _____	_____
_____	() _____	_____

PLEASE PROVIDE YOUR RESIDENTIAL ADDRESSES FOR THE PAST TEN YEARS OR LAST FIVE COUNTIES OF PERMANENT RESIDENCE.

Please print clearly. Give full address including zip code.

Job Applicant's Agreement and Certification

"I certify that the information given by me in this application is true in all respects, and I agree that if the information given is found to be false in any way, it shall be considered sufficient cause for denial of employment or discharge. I authorize the use of any information in this application to verify my statements, and I authorize past employers, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information."

"I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between FWBFM and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon FWBFM unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that FWBFM retains the same right."

"If I am offered employment, I agree to submit to a physical examination and a drug screen whenever requested, and I understand my becoming employed and/or my continued employment are subject to the results of any physical examination related to my job duties in accordance with company policies and procedures."

"I understand that if employed, policies, and rules which are issued are not conditions of employment and that the employer may revise policies or procedures in whole or in part, at any time."

"I understand that this application will be kept on file for ninety days from the date completed, after which time I would have to reapply in accordance with established company procedures."

Pre-Employment Drug Free Testing Consent and Release Form

I hereby consent to submit to urinalysis and/or other tests as shall be determined by Free Will Baptist Family Ministries, in the selection process of applicants for employment or the purpose of determining the drug content thereof.

I agree that the testing facility and medical review officer may collect these specimens for these tests and may test them or forward them to a testing laboratory designated by the company for analysis.

I further agree to and hereby authorize the release of the results of said tests to the company.

I understand that it is the current illegal use of drugs and/or abuse of alcohol that prohibits me from being employed at this company.

I further agree to hold harmless the company and its agents (including the testing laboratory or clinic) from any liability arising in whole or part of the collection of specimens, testing, and use of the information from said testing in connection with the company's consideration of my employment application.

I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

Applicant:
Print Name _____ SS# _____ - _____ - _____

Applicant:
Signature _____ Date: _____ / _____ / _____

Witness Printed Name: _____

Witness signature: _____

(Signature of Applicant)

(Date)