

EMPLOYMENT APPLICATION

13501 N Gayton Road | Henrico, VA 23233 | 804.360.4354 | space@gayton.church | www.shortpumpspace.org

PERSONAL INFORMATION:

Name:			Social Security	#:	
Last	First	М			
Address:					
Street		APT #	City	State	Zip
Phone Numbers: ()	Home	_	()	Cell	<u></u>
Email address:					
When are you available for emp	loyment?	/	/	_	
Are you at least 18 years of age	or older? Y	es No	If no, please state	e age	-
Do you have any medical condit which you are applying?	ion(s) which may Yes N		fulfilling the respon	sibilities of the p	osition for
If yes, please explain:					

EDUCATION: List most recent first

Name of School	Date Attende	d (MM/YY)	Degree	Year Earned
	From:	To:		
	From:	To:		
	From:	To:		
	From:	То:		

CERTIFICATIONS:

Do you currently have (within last 2 years) CPR certification? if yes, please attach copy. Exp. date://	Yes	No			
Do you currently have (within last 3 years) First Aid certification? If yes, please attach copy. Exp. Date://	Yes	No			
Do you have any other certifications, which may be applicable? If yes, please list and attach copy	Yes	No _ Exp. Date: _	_/	/	

EMPLOYMENT HISTORY: Begin with your most current or last employer. If you have been unemployed during any time within the past ten years, list how you spent your time, e.g., student, homemaker, unemployed, etc.

Dates Employed					
Street	City		State	Zip	
Name	Title		F	Phone	
May we contact for r	references? Ye	es No			
					_
					-
		Dates Er	nployed		
			. ,		-
Street	City		State	Zip	
Name	Title		F	Phone	
May we contact for r	references? Ye	es No			
					_
	Street Name May we contact for r Street Name May we contact for r	Street City Name Title May we contact for references? Ye Street City Name Title May we contact for references? Ye Name Title May we contact for references? Ye	Street City Name Title May we contact for references? Yes No No Dates Enderstanding Street City Name Title May we contact for references? Yes Name Title May we contact for references? Yes	Street City State Name Title F May we contact for references? Yes No	Street City State Zip Name Title Phone May we contact for references? Yes No Dates Employed Street City State Zip Name Title Phone May we contact for references? Yes No

OTHER EXPERIENCE:

Please describe any	leadership experience	and/or training v	which may have	e bearing on the	position for which
you are applying:					

Please describe any hobbies a	nd/or skills whic	ch you would be willing to teach the chi	ldren in your care:
Which age groups of children h	nave you worke	d with previously?	
With what age groups do you p	orefer working?		
Explain briefly why you would I	ike to work at T	he SPACE?	
REFERENCES At minimum, history section, the following re		nces. In addition to work references ind	dicated in the employment
Name:		Relationship to applicant:	
First	Last	Relationship to applicant:	
Occupation & Company:			
Address:			
Address: Street	City	State	Zip
Phone number: ()		Email address:	
Name:		Relationship to applicant:	
First	Last	Relationship to applicant:	
Occupation & Company:			
Address:			
Street	City	State	Zip
Phone number: ()		Email address:	
Name:		Relationship to applicant:	
		Relationship to applicant:	
Occupation & Company:			
Address:			
Street	City	State	Zip
Phone number: ()		Email address:	

	of the tremendous responsibility The ation is needed from all applicants an		
convictions.* A record on convi form accurately and completely employment or shall be cause f false information with a public a	ction is not an absolute bar from emp shall constitute sufficient cause for di for consideration of dismissal if employ igency. Applicants and employees mu ially complete this form. Please read	loyment; however, failure squalification from consic yed and may result in pro ust report any convictions	to complete this leration or secution for filing that occur
•	of a minor offense other than traffic vio)
	ith or convicted of a felony? Yes	No	
	ith or convicted of a sex or drug relate		
13.604.01?** Yes No	ith or convicted of a dangerous crime	•	ed in A.R.S.
If you answered "yes" to any of explanation.	the previous questions, please fill in t	he information below and	attach a letter of
Conviction Charge:		Date of conviction:	//
Court of Conviction:	City:		_State:
Amount of Fine: \$	Length of Jail Term:	Remarks:	
			·····

Do you currently attend a church and if so, which	h one?
Pastor's name and phone number:	

List any church activities in which you are currently involved:

As an applicant for employment with The SPACE, I agree to the following:

- I certify that the answers given by me are true and correct.
- I am aware that The SPACE may, without liability, disqualify me from employment or terminate my employment because of false statements or omissions made in this application.
- I authorize the entities and individuals named in this application to give relevant information regarding my application to The SPACE, including but not limited to, my employment history, work habits, and educational achievements.
- I understand that my employment will be "at will" which means that the employment may be terminated by me of The SPACE at any time, without cause.

Applicant's Signature:	Date:	
•		

If applicant is a minor, signature of Parent/Guardian:

Statement of Faith

I believe in the one God of the Trinity: God the Father; Jesus Christ, His Son; and His Holy Spirit. I also believe that the Bible is God's inspired Word and that everything in it is true.

Signed _____

Date _____

NOTICE OF NON-DISCRIMINATION: The SPACE is an Equal Opportunity Employer. Our employment policies are non-discriminatory regarding age, sex, color, race, national origin, or disabled status for qualified applicants. We are exempt from the Title VII requirements as it pertains to our religious beliefs and tenants.

*Conviction means the final judgement or finding of guilty, a plea of guilty, or a plea of nolo contendere, in any state or federal court of competent jurisdiction in a criminal case, regardless of whether an appeal is pending or could be taken.

**ARS 13.3716 requires applicants to give notice of any conviction for dangerous crimes against children. These crimes are defined in ARS 13.604.01 as second degree murder, aggravated assault, sexual assault, molestation of a child, sexual conduct with a minor, commercial sexual exploitation of a minor, sexual exploitation of a minor, child abuse, kidnapping and sexual abuse, if any of these crimes are committed against a minor under 15 years of age.