DATE:­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- |
| Position Sought: | How did you learn about this position? |
| PERSONAL |
| Name: (Please PRINT: Last Name, First, and Middle Initial)   | Social Security Number:   |
| Address: (Street Number and Name, City, State, and Zip)     | How long have you lived in this city and state?   | Do you have a valid Driver’s License in KY? \_\_\_Yes \_\_\_ No | Have you ever applied for employment with HBC before? \_\_\_Yes \_\_\_ No |
| Home Phone:  | Other Phone: |   |
| Date Available for Employment:  | Church Affiliation: (Name/Address)  |
| E-Mail Address:  |
| Do you have any relatives that work or serve at HBC? \_\_\_Yes \_\_\_ No Who? Relationship?  |
| EDUCATION and TRAINING |
| Last Level of Education Completed: 9th 10th 11th 12th College \_1 \_2 \_3 \_4 Additional |
| Name of School | Location | City/State | Major | Minor | Degree |
|   |   |   |  |   |  |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
| REFERENCES |
| Name | Address | Phone | E-Mail   |
| Name | Address | Phone | E-Mail   |
| Name | Address | Phone | E-Mail   |

|  |
| --- |
| EMPLOYMENT HISTORY |
| Employer   | Employment Dates: From \_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_  | Hourly or Monthly Salary Start \_\_\_\_\_\_\_\_\_ Finish \_\_\_\_\_\_\_ | Immediate Supervisor | May we contact this employer? \_\_\_Yes \_\_\_ No |
| Description of Duties | Did you work under another name?\_\_\_Yes \_\_\_ No If yes, what name? | Phone Number | Fax Number |
| Reason for Leaving | Account for period between jobs:  |
| Employer Address      | Employment Dates: From \_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_ | Hourly or Monthly Salary Start \_\_\_\_\_\_\_\_\_ Finish \_\_\_\_\_\_\_ | Immediate Supervisor | May we contact this employer? \_\_\_Yes \_\_\_ No |
| Description of Duties | Did you work under another name?\_\_\_Yes \_\_\_ No If yes, what name? | Phone Number | Fax Number |
| Reason for Leaving | Account for period between jobs:  |

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| --- |
| MISCELLANEOUS |
| Please write a brief statement of your testimony of receiving Jesus Christ as Savior          |
| I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information or omission of facts herein will be cause for dismissal. I hereby authorize the ministry to investigate my record with my former employers, personal references and other background information, and release HBC, its representatives and informants from all liability whatsoever from such an investigation.  Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| In consideration of my employment, I agree to conform to the rules, regulations, policies and procedures of the ministry. I understand that, if employed, my employment will not be for a stated period and my employment can be terminated with or without cause and with or without notice at any time, in accordance with the Personnel Policies and By-Laws of HBC.  Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| If you are not a U.S. citizen, are you legally authorized to work in the United States? \_\_\_\_ Yes \_\_\_\_ No(If yes, you must complete the I-9 Form required by the Immigration and Naturalization Service no later than three (3) business days after your date of hire.)  Have you ever been convicted of a felony? \_\_\_\_\_ Yes \_\_\_\_\_ No(If yes, please explain. - a conviction will not necessarily be a bar to employment, and such factors such as age at the time of offense, seriousness of the violation, and rehabilitation will be taken into consideration.) |
| In case of accident or emergency, please notify: (name, address, phone, relationship) |

**ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.**