



Thank you for your interest in a position with Brecksville United Methodist Church. Please complete the employment application below. Contact the church office with questions or for clarifications: 440-526-8938. Return application to the church office, Attention Staff Parish Relations, 65 Public Square, Brecksville, OH 44141.

**BRECKSVILLE UNITED METHODIST CHURCH EMPLOYMENT APPLICATION**

(PLEASE PRINT OR TYPE IN BLACK INK)

LAST NAME		FIRST NAME		MIDDLE NAME		POSITION APPLIED FOR OR TYPE OF WORK DESIRED:				
STREET ADDRESS			CITY	STATE	ZIP CODE	APPLYING FOR FULL-TIME <input type="checkbox"/> PART-TIME/TEMP <input type="checkbox"/>		E-mail: _____ SALARY EXPECTED: \$ _____		
SOCIAL SECURITY NUMBER		IF NOT U.S. CITIZEN, DO YOU HAVE AUTHORIZATION TO ACCEPT EMPLOYMENT IN U.S.? Y / N		HM PH: _____ CELL PHONE: _____	WK PH: _____	WHO REFERRED YOU? _____				
DO YOU HAVE ANY PHYSICAL CONDITION THAT WOULD LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR? COMMENT: _____					NAMES OF RELATIVES WORKING AT BUMC (INDICATE RELATIONSHIP) _____					
EVER WORK HERE BEFORE?		APPLY?	WHEN?	DATE AVAILABLE FOR WORK:						
I HAVE HAD <b>EXPERIENCE OR TRAINING</b> AS CHECKED BELOW:										
<input type="checkbox"/> WRITING / EDITING		<input type="checkbox"/> MINISTRY		<input type="checkbox"/> SUPERVISION		<input type="checkbox"/> BOOKKEEPING / ACCOUNTING		<input type="checkbox"/> PRINTING		
<input type="checkbox"/> TEACHING		<input type="checkbox"/> MARKETING		<input type="checkbox"/> MANAGEMENT		<input type="checkbox"/> SECRETARIAL		<input type="checkbox"/> PHOTOGRAPHY		
<input type="checkbox"/> CPR/FIRST AID CERTIFICATION		<input type="checkbox"/> COMPUTER		<input type="checkbox"/> CLERICAL		<input type="checkbox"/> DATA ENTRY		<input type="checkbox"/> TYPING / SPEED		
<input type="checkbox"/> OTHER		LANGUAGES YOU READ, SPEAK OR WRITE FLUENTLY: _____								
<b>EDUCATION</b>	NAME OF SCHOOL	CITY AND STATE		YEAR COMPLETED	CIRCLE YEAR COMPLETED	INDICATE DIPLOMA OR TYPE OF DEGREE		MAJOR(S)	MINOR(S)	AVERAGE GRADE
ELEM. AND HIGH SCHOOL					6 7 8 9 10 11 12 GED					
COLLEGE					13 14 15 16					
OTHER										
OTHER										
SCHOOL HONORS AND AWARDS:				SCHOOL ACTIVITIES PARTICIPATED IN AND OFFICES HELD:						
<b>U.S. MILITARY SERVICE</b>	BRANCH	DATES (FROM-TO)	OCCUPATIONAL SPECIALTY	RANK	HOBBIES OR INTERESTS:					
LIST <b>PRESENT AND PAST EMPLOYMENT</b> BEGINNING WITH YOUR LAST POSITION HELD (WRITE ON THE BACK OF THIS SHEET IF MORE SPACE IS NEEDED.)										
	FROM MO / YR	TO MO / YR	NAME OF COMPANY AND ADDRESS	NAME OF SUPERVISOR	SALARY	PER	WHAT DID YOU DO?	WHY DID YOU LEAVE		
1				PHONE: _____						
2				PHONE: _____						
3				PHONE: _____						
PERSONAL REFERENCES	1	NAME, OCCUPATION			The answers given herein are true and correct to the best of my knowledge. I hereby authorize Brecksville UMC to contact my schools and previous employers for reference information to be held in strict confidence and hereby release the individuals connected therewith from all liability. My present employer <input type="checkbox"/> may <input type="checkbox"/> may not be contacted. <b>DATE:</b> _____ <b>SIGNED:</b> _____					
		ADDRESS								
		PHONE								
	2	NAME, OCCUPATION								
		ADDRESS								
		PHONE								