

## APPLICATION FOR EMPLOYMENT (non-called worker) St. Matthew Lutheran Church

Because we are a church body, St. Matthew Lutheran Church retains the right to give preference in hiring to persons who are members in good standing of a Lutheran Church – Missouri Synod (LCMS) congregation.

### PERSONAL DATA

Name \_\_\_\_\_ Home Telephone (\_\_\_\_) \_\_\_\_\_  
Last First Middle

Present Address \_\_\_\_\_  
Street Address City State Zip Code

Previous Address \_\_\_\_\_  
Street Address City State Zip Code

Are you 18 years or older?  Yes  No

### WORK PREFERENCE

Type of work or position applied for \_\_\_\_\_ Referred by \_\_\_\_\_

Interested in  Full-time  Part-time  Summer

Date available for work \_\_\_\_\_

### LCMS INFORMATION

Have you been employed by The Lutheran Church – Missouri Synod (LCMS) previously?  Yes  No

If yes, when? \_\_\_\_\_

Location \_\_\_\_\_

Have you previously applied to LCMS?  Yes  No If yes, give date \_\_\_\_\_

Do you have relatives employed by LCMS?  Yes  No Name \_\_\_\_\_ Location \_\_\_\_\_

### OTHER

Are you a citizen of the United States or do you have a valid authorization to work in the United States?  Yes  No

Have you ever been convicted, pleaded guilty or pleaded “no contest” to any crime (including sexual misconduct), other than traffic violations in the past?

Yes  No If yes, please explain \_\_\_\_\_  
 (Answering this question will not automatically disqualify you from being hired.)

Have you ever been discharged or asked to resign by a previous employer?  Yes  No If yes, please explain \_\_\_\_\_

Can you perform the essential duties of the job in which you wish to be employed, with or without accommodation?  
 Yes  No

### PERSONAL REFERENCES

Name and address	Telephone	Business/Profession	Length of acquaintance
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

**EMPLOYMENT HISTORY**

List your complete employment record including temporary, regular and part-time in date order with **most recent first**. List military service, if applicable, as part of employment record.

**MOST RECENT EMPLOYER** – Are you currently working for this employer  Yes  No If yes, may we contact?  Yes  No

Company Name \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_  
 Address \_\_\_\_\_

Street Address City State Zip Code

Starting Position Title \_\_\_\_\_ Ending Position Title \_\_\_\_\_  
 Supervisors Name \_\_\_\_\_ Title \_\_\_\_\_

Employed From \_\_\_\_\_ Full-time   
 Part-time

Brief job description \_\_\_\_\_

If you were employed under a different name, give that name in full \_\_\_\_\_

Company Name \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_  
 Address \_\_\_\_\_

Street Address City State Zip Code

Starting Position Title \_\_\_\_\_ Ending Position Title \_\_\_\_\_  
 Supervisors Name \_\_\_\_\_ Title \_\_\_\_\_

Employed From \_\_\_\_\_ Full-time   
 Part-time

Brief job description \_\_\_\_\_

If you were employed under a different name, give that name in full \_\_\_\_\_

Company Name \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_  
 Address \_\_\_\_\_

Street Address City State Zip Code

Starting Position Title \_\_\_\_\_ Ending Position Title \_\_\_\_\_  
 Supervisors Name \_\_\_\_\_ Title \_\_\_\_\_

Employed From \_\_\_\_\_ Full-time   
 Part-time

Brief job description \_\_\_\_\_

If you were employed under a different name, give that name in full \_\_\_\_\_

**EDUCATION**

School Name/Address	Number of Years Attended	Diploma/Degree	Major Subject	Grade Point Average
High School Address				
Business/Trade School Address				
College/University Address				

# Authorization and Release

In connection with my application for employment, I understand that an investigative consumer report may be requested that will include information as to my character, work habits, performance and experience, along with reasons for termination of past employment. I understand that, as directed by company policy and consistent with the job described, you may be requesting information from public and private sources about my: workers' compensation injuries, driving record, criminal record, education, credentials, credit and references. I voluntarily and knowingly authorize the company, and/or its agents, to verify any aspect of the information contained in my employment application or through public or private sources. I further understand that misrepresentations or omissions in my employment application may be cause for rejection or subsequent dismissal if I am hired.

According to the Fair Credit Reporting Act (FCRA), I am entitled to know if employment is denied because of information obtained by my prospective employer by a consumer reporting agency. If so, I will be notified and given the name and address of the agency or the source which provided the information.

I voluntarily and knowingly authorize any former employer, person, firm, corporation, school or government agency, its officers, employees and agents to release to you or your agents any and all information concerning my former employment. I understand that the employment information may include, but is not necessarily limited to, performance evaluation and reports, job descriptions, disciplinary reports, letters of reprimand and opinions regarding my suitability for employment possessed by it.

I voluntarily and knowingly fully release and discharge, absolve, indemnify and hold harmless you, your agents and any former employer, person, firm, corporation, school or government agency, its officers, employees and agents from any and all claims, liability, demands, causes of action, damages, or costs, including attorney's fees, present or future, whether known or unknown, anticipated or unanticipated, arising from or incident to the disclosure or release of any such legal information to you, your agents, or consumer reporting agency.

I hereby authorize you to procure a consumer report as part of the pre-employment background investigation. If hired, this authorization shall remain on file and shall serve as an ongoing authorization for you to procure consumer reports at any time during my employment period.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The following information is required by law-enforcement agencies and other entities for positive identification process when checking public records. It is confidential and will not be used by any other purposes.

## PLEASE PRINT CLEARLY

\_\_\_\_\_  
Name: Last

\_\_\_\_\_  
First

\_\_\_\_\_  
Middle

\_\_\_\_\_  
Other names used (*include aliases and nicknames*):

\_\_\_\_\_  
Address:

\_\_\_\_\_  
City/State/ZIP:

\_\_\_\_\_  
Telephone Number:

\_\_\_\_\_  
Social Security Number:

\_\_\_\_\_  
Driver's License Number:

\_\_\_\_\_  
Type:

\_\_\_\_\_  
State:

# **Acknowledgment of Understanding and Consent**

**PLEASE READ BEFORE SIGNING. If you have any questions regarding this statement, please ask them of an employment interviewer before signing.**

This organization does not discriminate in hiring or employment on the basis of race, color, national origin, sex, age or disability. Because we are a church body, St. Matthew Lutheran Church retains the right to give preference in hiring to persons who are members in good standing of a Lutheran Church – Missouri Synod congregation.

It is understood that this application is not an obligation to provide employment. The application will be kept active for three months, and it must be renewed to be active for a longer period.

I hereby certify that the statements made in this employment application are true and complete, to the best of my knowledge, and I authorize investigation of those statements. I understand that falsification, misrepresentation or omission of facts may lead to elimination of any consideration for employment, or dismissal from St. Matthew Lutheran Church if I have been employed.

St. Matthew Lutheran Church is an “at-will” employer and has the right, exercisable at any time, and without notice, to change wages, to change or eliminate benefits and policies, as well as to terminate, with or without cause, the employment relationship. I understand that no manager or representative of St. Matthew Lutheran Church, other than the President of the Church, has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing.

I understand that all employees of St. Matthew Lutheran Church are expected to respect the official doctrines of The Lutheran Church – Missouri Synod and to pursue lifestyles that are in harmony with its teachings.

I agree that I have read and understand the above acknowledgments and agreements and recognize all of the above as conditions of employment.

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Signature

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Date

