



## Employment Application

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

We are pleased you are interested in joining the staff of Word of Life Christian Center. We will be asking you to provide us detailed information that will help us get to know you more personally. Please make sure you complete each part of this application.

### MEMBERSHIP

To be employed at Word of Life Christian Center, we require you to be an active member of our church for a minimum of 6 months prior to applying for a position. Please initial below that you have completed and are adhering to the following, which are prerequisites to employment at Word of Life Christian Center.

- \_\_\_\_\_ Accepted Jesus Christ as your Personal Savior.
- \_\_\_\_\_ Demonstrated your commitment by the outward expression of water baptism by immersion.
- \_\_\_\_\_ Completed Foundation for Faith Membership class.
- \_\_\_\_\_ Committed to attending services on a weekly basis.
- \_\_\_\_\_ Faithful to Tithe (10% of income) and support the Arise and Build program.

### LEADERSHIP REQUIREMENTS

While working at Word of Life Christian Center, you will be visible and viewed as a leader. We ask that each staff member commit to certain lifestyle expectations, be in a position to effectively minister to others, and be maturing as a believer. At a minimum this means you:

- agree with the Tenets of Faith
- understand the importance of and have committed to tithing consistently.
- commit willingly to refrain from activities such as abusing prescription drugs, consuming alcohol, tobacco or illegal drugs or engaging in gambling of any type.
- refrain from going to bars or clubs.
- attend three services a week and all special meetings.
- attend Corporate Prayer at least twice per month.
- do not look at pornography in any form at any time.
- will not engage in any sexual acts outside of marriage (fornication, adultery, homosexual acts)
- if married, you are committed to a biblically based marriage (no same sex marriage).

\_\_\_\_\_ By initialing here, I agree to follow the leadership requirements as outlined above.

## SPIRITUAL HISTORY

Were you previously a member of another church?    YES    NO

Name of Church \_\_\_\_\_ City/State \_\_\_\_\_

How long did you attend? \_\_\_\_\_

What is your primary church background? (Give denomination or type of church, such as Pentecostal, Charismatic, Evangelical, Baptist, Catholic, AME, Fundamental, Non-denominational, or Independent, etc).

\_\_\_\_\_

If you have a secondary church background, what is it? (Use above guidelines)

\_\_\_\_\_

Have you been born again (i.e., Have you accepted Jesus Christ as your personal Savior)?

YES    NO   If "Yes", where? \_\_\_\_\_ Year \_\_\_\_\_

Have you been filled with the Holy Spirit, with the evidence of speaking in other tongues?

YES    NO   If "Yes", where? \_\_\_\_\_ Year \_\_\_\_\_

Have you been baptized by immersion in water?

YES    NO   If "Yes", where? \_\_\_\_\_ Year \_\_\_\_\_

Please provide your testimony on a separate page (at least a paragraph and no more than one page). At a minimum please include the following:

- Your spiritual, religious or church upbringing.
- When you began a personal relationship with Jesus Christ.
- The difference in what you believed before you began a personal relationship with Jesus Christ and after.
- The changes you and others noticed in your life.
- How God is working in your life today.

## MINISTRY

Each staff member is expected to be actively volunteering in ministry. Please indicate your past and current ministry involvement at WLCC.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PERSONAL BACKGROUND

Do you smoke anything or use tobacco in any form?  Yes  No Date of last use \_\_\_\_\_

Do you consume alcoholic beverages?  Yes  No Date of last use \_\_\_\_\_

If you drink, how often?

If only socially, please explain.

Do you go to bars or clubs?  Yes  No If "yes", please explain

Do you gamble?  Yes  No

If you gamble, is it  Regularly (like every week)  Occasionally Date last gambled \_\_\_\_\_

We have a deep commitment to protect our children, volunteers, and those associated with this ministry. In today's fragmented and litigious society, it is necessary and wise that we ask all prospective employees to please help us by answering these questions and signing this form. Your responses are kept confidential. These questions are required due to legal/judicial precedent in actions taken against churches where liabilities were determined due to incomplete screening of employees and volunteers.

Have you ever engaged in any child abuse or a crime involving actual or attempted sexual molestation of a minor?  Yes  No If "yes" please explain \_\_\_\_\_

Were you a victim of child abuse or molestation as a minor?  Yes  No

(NOTE: Answering "yes" to this question will not necessarily disqualify you from being employed by Word of Life Christian Center. If you would like to discuss your answer to this question with a member of the Pastoral Staff, we will arrange it. When making an appointment for this purpose, you may say it is regarding your Application for Employment.)

Have you engaged in any sexual acts outside of marriage (fornication, adultery, homosexual acts) during the last 6 months?  Yes  No If "yes" give date of last encounter \_\_\_\_\_

If "yes" please explain \_\_\_\_\_

Are you taking (or have you taken in the past 6 months) any drugs for purposes other than medical?  Yes  No If "yes" what and how recently? \_\_\_\_\_

Do you look (or have you looked in the past 6 months) at pornography in any form?  Yes  No

If "yes" what and how recently? \_\_\_\_\_

**PERSONAL INFORMATION**

Legal Name \_\_\_\_\_  
Last First Middle (Suffix Jr., III, etc.)

Have you worked in any previous positions under another name?  
\_\_\_\_\_

Contact information:

Daytime \_\_\_\_\_ Evening \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Do you have a driver's license?  YES  NO

Are you over 17 years of age?  YES  NO

Name and address of the person to be notified in case of emergency.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If hired, can you present evidence of your U. S. Citizenship or proof of your legal right to live and work in this country?  YES  NO

What languages do you speak and/or write fluently?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a criminal offense (felony or misdemeanor) other than traffic violations?  YES  NO If yes, state nature of the crimes(s), when and where convicted, and disposition of the case.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**POSITION INFORMATION**

List the position(s) you are applying for:

	Position Title	List the minimum acceptable salary range
1.	_____	_____
2.	_____	_____

Would you be willing and able to perform all tasks required by the job for which you are applying? YES NO

If no, describe the functions that cannot be performed \_\_\_\_\_

Note: We comply with the ADA and consider reasonable accommodations measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and a skill and agility tests.

**SKILLS, SPECIAL TRAINING, EDUCATION**

You may be required to provide verification of each degree or diploma listed. Copies of licensing and ordinations (if applicable) will also be requested.

High School \_\_\_\_\_ City/State \_\_\_\_\_ Did you graduate? \_\_\_\_\_

College or University \_\_\_\_\_ City/State \_\_\_\_\_

Did you graduate \_\_\_\_\_ Degree \_\_\_\_\_ Years completed \_\_\_\_\_

Course of Study \_\_\_\_\_

Other Formal Training and Certifications \_\_\_\_\_

Course of Study \_\_\_\_\_ Degree/Certificate/Other \_\_\_\_\_

Licensing/Ordinations \_\_\_\_\_

Licensing Body \_\_\_\_\_ When? Where? \_\_\_\_\_

Specialized Skills \_\_\_\_\_

Any other experience, training, qualifications or skills? Please describe:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Are you a Veteran?** \_\_\_\_\_ Yes \_\_\_\_\_ No

Branch of Service \_\_\_\_\_

Rank & Type of Service \_\_\_\_\_

Training & Experience Received

\_\_\_\_\_  
\_\_\_\_\_

## EMPLOYMENT INFORMATION

Please list all employment history for the past 10 years in consecutive order starting with the most current employer. Include all periods of unemployment. This information is subject to verification through pay stubs, tax documents or verification of employment.

Employer Name \_\_\_\_\_ Type of Business \_\_\_\_\_  
Salary (monthly or hourly) \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address, City State, Zip \_\_\_\_\_  
Title and Position Duties \_\_\_\_\_ Eligible for Rehire? YES NO  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
                  Month/Year                   Month/Year  
Supervisor Name & Title \_\_\_\_\_ Contact Number \_\_\_\_\_

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Employer Name \_\_\_\_\_ Type of Business \_\_\_\_\_  
Salary (monthly or hourly) \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address, City State, Zip \_\_\_\_\_  
Title and Position Duties \_\_\_\_\_ Eligible for Rehire? YES NO  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
                  Month/Year                   Month/Year  
Supervisor Name & Title \_\_\_\_\_ Contact Number \_\_\_\_\_

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Salary (monthly or hourly) \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address, City State, Zip \_\_\_\_\_  
Title and Position Duties \_\_\_\_\_ Eligible for Rehire? YES NO  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
                  Month/Year                   Month/Year  
Supervisor Name & Title \_\_\_\_\_ Contact Number \_\_\_\_\_

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Title and Position Duties \_\_\_\_\_ Eligible for Rehire? YES NO  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
                  Month/Year                   Month/Year  
Supervisor Name & Title \_\_\_\_\_ Contact Number \_\_\_\_\_

***Please list other employment on separate sheet of paper to equal 10 years.***

## PERSONAL/PROFESSIONAL REFERENCES

Provide 3 references that are not related to you and have knowledge of your character and qualifications.

_____	_____	_____
Name	Relationship	Phone and Address

_____	_____	_____
Name	Relationship	Phone and Address

_____	_____	_____
Name	Relationship	Phone and Address

**EMPLOYMENT DISCLOSURE**

This Church does not discriminate in hiring or employment on the basis of race, color, national origin, gender, ancestry, or age. No question on this application is intended to secure information to be used for such discrimination.

The application will be given every consideration but its receipt does not imply that the applicant will be employed. The Church may, at its own expense, arrange for surety bond for selected employees. Unless the applicant's background is acceptable to a surety company (not relative to race, color, national origin or ancestry) it will be difficult to secure this bond and the Church may be unable to offer employment.

In processing this employment application, the Church may request that an investigative consumer report be prepared, which may include information as to your character, general reputation, criminal convictions, personal characteristics and mode of living. You have the right to request that the Church completely and accurately disclose to you the nature and scope of the investigation requested. Such a request must be made in writing to the Human Resources Department of this Church within a reasonable time after you complete this application.

I hereby acknowledge that I have read the foregoing disclosure and understand the same.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**UNEMPLOYMENT COMPENSATION STATEMENT**

Word of Life Christian Center is exempt under the provisions of federal and state law from coverage. Accordingly, employees of Word of Life Christian Center are not entitled under present law to unemployment benefits by reason of their employment with Word of Life Christian Center except in the event of special legislation by state legislature or the Congress of the United States.

I hereby acknowledge that I have read the foregoing disclosure and understand the same.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**As an applicant for Word of Life Christian Center’s Employment, I agree to the following:**

1. I understand that any employment is conditional until results of any tests, examinations, verifications or references required by Word of Life Christian Center, are known and verified.
2. I certify that the answers given by me, on this application are true and correct.
3. I am aware that Word of Life may, without liability, disqualify me from employment or terminate my employment because of false statements or omissions given on this application regardless of time elapsed before discovery.
4. I authorize the entities and individuals named in this application to give relevant information regarding my application to Word of Life Christian Center, including but not limited to: my employment history, work habits, educational achievements and other matters related to my suitability for employment.
5. I hereby release Word of Life Christian Center, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
6. I understand that my employment will be “at will”, which means that employment may be terminated by me or Word of Life Christian Center at any time, without cause.
7. I understand that Word of Life Christian Center is exempt under the provisions of federal and state law from coverage of “Unemployment Compensation”. Accordingly, employees of Word of Life Christian Center are not entitled under present law to unemployment benefits by reason of their employment with Word of Life Christian Center except in the event of special legislation by state legislature or the Congress of the United States.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_

Word of Life Christian Center is an Equal Employment Opportunity Employer. Our employment policies are non-discriminatory regarding age, sex, color, race, national origin or disability status for qualified applicants. We are exempt from the Title VII requirements as it pertains to our religious beliefs and tenants.