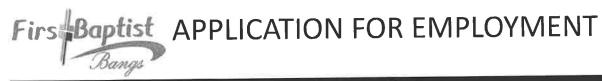
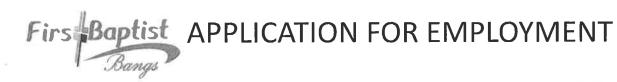


First Baptist Church (FBC) does not discriminate based on race, color, national origin, gender (except when gender is a bonafide occupational qualification), age, veteran status, disability or genetic information. As a church, FBC reserves the right under federal law to discriminate in employment based on religion. A background investigation will be conducted on all individuals offered employment.

Foday's Date Position for which you are applying				
	Personal Information (Ple	ease Print)		
Last Name	First Name	Middle		
Address	City	State/Zip Code		
Home Phone	Cell Phone	E-Mail Address		
Do you have a driver's lice	nse? License number	State		
After reading the Job Description for this position, are you able to perform the Essential Functions and Duties and meet the physical requirements of this position? Yes No If No, please explain				
FBC seeks to employ perso to integrate their experience	ons who are in agreement with it's purpose, Byle and expertise with the Christian faith. Are you	aws, and Constitution, and who have the talents and skills a Christian?		
If yes, where is your church Please provide your pastor Briefly describe your person	's name and a contact number.			



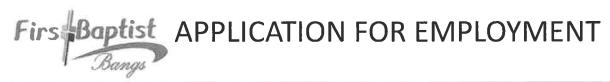
	Employment Details							
Are you currently emp	oloyed? Yes] No		ntact your present emplo		Yes	No	
Can you furnish proof of U.S. citizenship or immigration status upon employment? Yes No				Can you show proof of eligibility to work in the United States? Yes No				
(If you are offered employment, you will be required to provide documentation to verify your eligibility upon employment.)								
List any other name(s) under which you have eve	er worked						
Consistent work atter with your regular atte	dance and punctuality are endance and punctuality if y	essential re ou were o	equirements to work	at FBC Bangs. Explain e church.	anything	that would	interfere	
On what date are you	available to begin work if	you are of	fered employment?					
			gal Background					
Have you ever been o	Have you ever been convicted of, plead no contest (nolo contendere) to, or received deferred adjudication for a felony? Yes No							
If yes, what degree felony? State			County	Dat	Date			
Explain								
Have you ever been convicted of, plead no contest (nolo contendere) to, or received deferred adjudication for a misdemeanor? Yes No If yes, please provide information below								
State	Со	unty		Date				
Explain								
Educational	Background (If additional							
School	Name and location of sc	hool	Graduate Yes No	Diploma/Degree	Ma	ijor Field o	Study	
High School						NA		
Technical, Vocational or Business School								
Undergraduate Colleges or Universities								
Graduate Schools								



List your employment history continue on the blank page at	for the last five (5) years. Start with	your current or last p	osition. If you need additional space, please	
Job Title E	Employer	Dates Employed		
Address			Phone Number	
Full Time Part-time	Average number of hours worked per week	Final Salary	Hourly Monthly	
Supervisor's Name	Supervisor's Title		Supervisor's Phone Number	
Briefly describe job duties an	d responsibilities.			
Reason for leaving				
Job Title I				
Job Title	Employer		Dates Employed	
Address	Employer		Dates Employed Phone Number	
Address	Average number of hours worked per week	Final Salary		
Address	Average number of hours worked	Final Salary	Phone Number	
Address Full Time Part-time	Average number of hours worked per week Supervisor's Title	Final Salary	Phone Number Hourly Monthly	



Job Title	Employer		Dates Employed			
Address				Phone Number		
Full Time Part-tir	ne Average ni per week	umber of hours worked	Final Salary	Hourly Monthly		
Supervisor's Name		Supervisor's Title		Supervisor's Phone Number		
Briefly describe job duties a	and responsibilit	ies <u>.</u>				
Reason for leaving						
(If additional space is needed, please use the blank page at the end of this application.)						
Have you ever been discharged or asked to resign from a job? Yes No If No, please explain						
Explain any gaps in your previous employment history.						
	Job-	-Related Professional Lic	enses or Certifica	tions		
License or Certificate number			/pe			
Date acquired			spiration date			
License or Certificate number			ype			
Date acquired		Ех	xpiration date			
License or Certificate number			/pe			
Date acquired			piration date			



Specialized Training or Skills				
Describe any specialized training	, apprenticeship or skills relevant to your ability to perform the job for which you are applying.			
If relevant to the job for which yo	ou are applying, list below training/skills in which you are proficient.			
Office machines				
Microsoft Office software				
Database management				
Other (i.e. CPR, first aid)				
	Additional Information (Optional)			
Use this space, if needed, to comy you are providing additional info	plete any of the questions in this application. Please indicate the page number and section for which rmation.			



APPLICATION FOR EMPLOYMENT

Applicant's Certification and Agreement

Please read carefully before signing.

By my signature below, I understand and agree that:

- 1. Full support of the Purpose, Constitution, and Bylaws of FBC Bangs is a condition of employment.
- 2. The church's receipt of this application does not imply any guarantee of an interview or employment.
- 3. If I misrepresent or deliberately omit any information on this application, I may be refused employment or if employed, I may be terminated.
- 4. If I am employed by FBC Bangs as a condition of employment, I agree to comply with the policies of the church.
- 5. As a condition of employment, I will be required to provide legal proof of authorization to work in the U.S.
- 6. If a conditional offer of employment is made to me, I grant the church permission to investigate thoroughly my educational, employment and personal history (which may include information concerning my character, criminal history, mode of living, general reputation, personal characteristic and related pertinent information). I hereby agree to release and waive any claim that I might have against FBC Bangs or any previous employer or school arising from either inquiries made by the church in order to verify the contents of my application or information provided by a former school or employer to the church's request.
- 7. I understand and acknowledge that, should I be employed by FBC Bangs, the employment relationship I have with the church will be on an "AT WILL" basis. This means that I am free to terminate my employment with the church at any time with or without cause or notice, and that the church is entitled to terminate my employment at any time without cause or notice.

I have read, understand and agree to the statements above and herby certify that the facts I have provided in my Employment Application are true and complete.

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Signature	Date		
Name printed		Clear Form	
Trumo printed		Print Form	Save Form
COLD RESIDENT PROGRAMMA CORPORADO DE CONTROLO PROGRAMMA POR COLD PROGRAMMA CONTROL		Submit A	oplication