

APPLICATION FOR EMPLOYMENT

Atlas: Lincoln
745 D St. Lincoln NE, 68502

Position Applied For

Date of Application

Last Name

First Name

Middle Name

Address

City

State

Zip

Telephone Number(s)

Preferred Mode of Contact

Are you currently employed?

Yes No

May we contact your present employer?

Yes No

Are you a documented citizen of the United States?

Yes No

Are you available to work: Full Time Part Time

Yes No

Are you currently on "lay-off" status and subject to recall?

Yes No

Can you travel if a job requires it?

Yes No

Would you be able to share the gospel of Christ?

Yes No

Are you a member of a local church?

Yes No

If yes, what church do you belong to? _____

Have you been convicted of a felony within the last 7 years? Conviction will not necessarily disqualify any applicant from employment. If yes, please explain. _____

On what date would you be available for work? _____

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, gender, national origin, disabilities, or other protected status.

1. Employer: _____
Address: _____
Telephone No. _____
Dates Employed: From: ____/____/____ To: ____/____/____
Job Title: _____ Supervisor: _____
Reason for Leaving: _____
Work Performed: _____

2. Employer: _____
Address: _____
Telephone _____
Dates Employed: From: ____/____/____ To: ____/____/____
Job Title: _____ Supervisor: _____
Reason for Leaving: _____
Work Performed: _____

3. Employer: _____
Address: _____
Telephone No. _____
Dates Employed: From: ____/____/____ To: ____/____/____
Job Title: _____ Supervisor: _____
Reason for Leaving: _____
Work Performed: _____

4. Employer: _____
Address: _____
Telephone No. _____
Dates Employed: From: ____/____/____ To: ____/____/____
Job Title: _____ Supervisor: _____
Reason for Leaving: _____
Work Performed: _____

IF YOU NEED ADDITIONAL SPACE, PLEASE CONTINUE A SEPARATE SHEET OF PAPER.

List professional, trade, business, or civic activities and offices held. You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status.

EDUCATION

	Name & Address of School	Course of Study	Years Completed	Diploma/ Degree
High School				
Undergrad College				
Graduate College				
Other (Specify)				

Specialized Skills (Check Skills)

Have Never Used	Basic Skill Level	Master Skill Level		Not My Favorite Thing	I Enjoy Doing This	I Love Doing This	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Microsoft Word	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Working with people
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Microsoft Publisher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Working on my own
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Microsoft Power Point	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Writing and composing
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Microsoft Excel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proofreading
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Microsoft Outlook	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Completing tasks for various people
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Answering the phone and greeting

Describe any specialized training, apprenticeship, skills, and extracurricular activities.

Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the activities involved in the job or occupations for which you have applied? _____ YES _____ NO

Additional Information

Describe your personal relationship with Jesus Christ.

State any additional information you feel may be helpful to us in considering your application.

REFERENCES

1. _____

Name		Phone
<hr/>		
Address	City	State

2. _____

Name		Phone
<hr/>		
Address	City	State

3. _____

Name		Phone
<hr/>		
Address	City	State

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date