

Welcome to Lighthouse

Application for Employment



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Thank you for considering a career opportunity with Lighthouse World Outreach Center. Completing this application is your first step toward joining a dynamic ministry dedicated to Christian service.

We encourage you to read through the packet before preparing your application. With a clear sense of the questions that follow, you will be able to present a strong, accurate record of your qualifications and skills.

Lighthouse World Outreach Center

PO Box 1596

Monroe, Georgia 30655

Phone: 770 267-4365

Fax: 770 207-7546

www.lighthousewoc.org

Reverend Raymond W. Hardy, Senior Pastor

Application for Employment

Applications are received and employees are hired without regard to race, creed, color, sex, age, national origin, marital status, physical or mental handicap, veterans status and citizenship status. The receipt of this application does not mean that job openings exist or does not obligate us in any way.

While completing this application, if you find it necessary to provide additional comments or explanations to questions asked, please attach additional sheets of paper. **PLEASE PRINT OR TYPE ALL INFORMATION!**

Date Prepared: _____

Personal Information

Name: _____ Social Security No: _____

Present Address: _____

How long have you lived at the above address? _____ Home Phone: _____

Previous Address: _____

How long did you live there? _____

Are you over 18? Yes No If no, employment is subject to verification that you are of minimum legal age.

What languages can you read, speak and write fluently? _____

Are you a citizen of the U.S., can you provide proof that you can legally be employed in the U.S.? Yes No

To comply with the Immigration Control Act of 1986, we will require two documents - one providing identity, the other providing work authorization. These may include, but not limited to, driver's license or Social Security Card.

Employment Information

Position applying for: _____ Date available to work: _____

What salary/hourly rate do you expect? _____

Type of employment: Full Time Part Time Temporary

What days and hours if part time? Days: _____ Hours: _____

Have you ever applied for a job with us before? _____ Have you ever worked for us before? _____

How did you learn about this opening? _____ List any relatives working for us: _____

Have you ever been bonded? Yes No Have you ever been refused bond? Yes No

If yes, please state the reason and date: _____

Have you ever been convicted of any crime other than a minor traffic violation? Yes No

If yes, state date, court and place where offense occurred: _____

Have you ever been discharged or requested to resign from a position? Yes No

If yes, please explain: _____

Does your present employer know of your plans to change employment? _____

Why do you desire to make a change? _____

Employment Information (continued)

Have you ever held a position of trust (handling money or confidential material)? Yes No

How much time have you lost from work this past year? _____

Would you have steady transportation to work? Yes No

Do you have any personal responsibilities or problems that may affect your daily attendance? Yes No

If yes, please explain: _____

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work with our organization? _____

Education

HIGH SCHOOL

Name of School: _____ City/State: _____

Did you graduate? Yes No Year of Graduation: _____

TRADE/CORRESPONDENCE SCHOOL

Name of School: _____ City/State: _____

Did you graduate? Yes No Year of Graduation: _____ Degree Received: _____

COLLEGE

Name of School: _____ City/State: _____

Did you graduate? Yes No Year of Graduation: _____ Degree Received: _____

COLLEGE

Name of School: _____ City/State: _____

Did you graduate? Yes No Year of Graduation: _____ Degree Received: _____

GRADUATE SCHOOL/SEMINARY

Name of School: _____ City/State: _____

Did you graduate? Yes No Year of Graduation: _____ Degree Received: _____

Church Affiliation

Please list your church membership(s) over the past five years:

Current Church: _____ Date Attended _____ City/State _____ Phone: _____

Previous Church: _____ Date Attended _____ City/State _____ Phone: _____

Previous Church: _____ Date Attended _____ City/State _____ Phone: _____

Employment History

MOST RECENT EMPLOYER _____ Phone: _____

Address: _____

Name and Position of Immediate Supervisor: _____ Dates of Employment: _____

Position/Title: _____ Starting Rate \$ _____ Ending Rate \$ _____

Describe Your Duties: _____

Reason for Leaving: _____

SECOND MOST RECENT EMPLOYER _____ Phone: _____

Address: _____

Name and Position of Immediate Supervisor: _____ Dates of Employment: _____

Position/Title: _____ Starting Rate \$ _____ Ending Rate \$ _____

Describe Your Duties: _____

Reason for Leaving: _____

THIRD MOST RECENT EMPLOYER _____ Phone: _____

Address: _____

Name and Position of Immediate Supervisor: _____ Dates of Employment: _____

Position/Title: _____ Starting Rate \$ _____ Ending Rate \$ _____

Describe Your Duties: _____

Reason for Leaving: _____

FOURTH MOST RECENT EMPLOYER _____ Phone: _____

Address: _____

Name and Position of Immediate Supervisor: _____ Dates of Employment: _____

Position/Title: _____ Starting Rate \$ _____ Ending Rate \$ _____

Describe Your Duties: _____

Reason for Leaving: _____

Personal References

Please do not list relatives or previous supervisors

Name: _____

Name: _____

Name: _____

Applicant's Statement - Please Read Carefully Before Signing

Lighthouse World Outreach Center conducts background investigations for those persons applying in our church. The church will assume financial responsibility for the investigation cost.

I consent to a pre-employment medical examination including a drug screening if required by LWOC. I also agree to take a medical examination any time after employment at the request of my employer, and agree that the examining physician may disclose the findings to the appropriate LWOC personnel.

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on my application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation on my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice in compliance with applicable laws or statutes.

I understand that employment at this organization is "at will", and includes no guarantee, contract, or promise of employment for any specified length of time. I further understand that a criminal record check may be conducted on me, and I consent to any such check.

I authorize the use of any information in this application and any attached supplements to verify my statements, and I authorize the past employers, schools, churches, all references, and any other persons or organizations, whether or not identified in this application, to answer all questions asked concerning my ability, character, reputation, and previous employment record, I release all such persons from any and all liability or damages on account of having furnished such information.

I hereby testify that I am the person who filled out this application in full.

Signature of Applicant

Please Print Name

Month/Day/Year

AUTHORIZATION FOR EMPLOYMENT OFFICIAL USE ONLY

Name: _____ Date Work Begins: _____
Department: _____ Position: _____
Job Title: _____ Replacing: _____

Person to be contacted in Case of Accident or Emergency

Name & Relationship: _____ Phone Number: _____
Address: _____

Employment Status (check only one)

Full Time Part-time Volunteer

Usual Work Schedule

Day Shift Specific Hours: _____

Payroll ID # _____

Pay Rate:

Hourly Employee: \$ _____ /Hour, Base=Total \$ _____
 Salaried Employee: \$ _____ /Hour Annum which is \$ _____ /Hour

Acceptance of Job

I, _____ accept the job stated at the quoted salary, subject to the "at will" provisions of Georgia Employment Law.

Signature of Applicant

Please Print Name

Month/Day/Year