



Application for Employment

Brentwood United Methodist Church
and its Campuses –



Spring Hill, Tennessee



Meeting at Sunset Middle School
Nolensville, Tennessee

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

PERSONAL PROFILE:

PLEASE TYPE YOUR ANSWERS IN THIS COLUMN FOR ALL QUESTIONS

First Name

Middle Name

Last Name

Address

How long have you lived at this address?

Email

Home Phone Number

Cell Phone Number

EMPLOYMENT INFORMATION:

Position Applied For

Type of Employment Desired

- Full-time (40 hours)
- Part-time (20–30 hours)
- Part-time (Less than 20 hours)
- Seasonal/Internship

Date you will be able to start work.

What salary / hourly rate do you expect?

Are you able to meet the stated work days/hours listed in the job description?

Do you have any objection to working overtime if necessary?

Can you travel if required by this position?

Have you ever been previously employed by our organization?

Can you submit proof of legal employment authorization and identity?

If you are under 18, can you furnish a work permit if it is required?

Have you ever been convicted of a crime in the last 7 years?

How were you referred to us?

EMPLOYMENT HISTORY:

If you have not already submitted your cover letter and/or resume, please send it to hr@bumc.net or attach it to this application.

Employer #1

Name of Employer

Address

Position Held

Phone Number

Immediate Supervisor & Title

Dates Employed: From/To

Job Summary

Reason for leaving

Ending Salary/Hourly Rate

May we contact the employers listed above?

If yes, please provide a phone number/email address of the Supervisor. If no, please provide a name of an alternate contact and their information.

Employer #2

Name of Employer

Position Held

Address

Phone Number

Immediate Supervisor & Title

Dates Employed: From/To

Job Summary

Reason for leaving

Ending Salary/Hourly Rate

May we contact the employers listed above?

If yes, please provide a phone number/email address of the Supervisor. If no, please provide a name of an alternate contact and their information.

Employer #3

Name of Employer

Position Held

Address

Phone Number

Immediate Supervisor & Title

Dates Employed: From/To

Job Summary

Reason for leaving

Ending Salary/Hourly Rate

May we contact the employers listed above?

EDUCATION:

List school name and location, years completed, course of study, and any degrees earned.

High School

College

Technical Training

Summarize any job-related training, skills,
licenses, certificates, and/or other
qualifications:

CHURCH AFFILIATION:

List any church memberships you have had
over the past five years.

PERSONAL REFERENCES:

Please list three reference -- do not include relatives. (Include Name, telephone numbers, and years known.)

Reference #1

Reference #2

Reference #3

Statement

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

Further, I understand that if I am employed, I will be required to complete a background check. Failure to complete the background check process or failure of the background check process shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant's Signature

Date Signed