APPLICATION FOR EMPLOYMENT

Oro Valley Church of the Nazarene (OVCN)
500 W. Calle Concordia
Oro Valley, AZ 85704
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It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability, results of genetic testing or other protected classifications. Please carefully read and answer all questions. You may attach a résumé, but all questions must be answered.

| I. PERSONAL INFORMA | TION | | | | |
|----------------------------------|-----------------|--------------------------|----------------|---------------|--|
| Name:Last Fir | | | | _ Sex:[]M []F | |
| Last Fir | rst | Middle | Preferred Name | | |
| Mailing Address: | | | | | |
| Physical Address: | | | Marital St | atus: | |
| Home Phone: | Business Phone: | | Cell Phone: | | |
| Email Address: | | | | | |
| | | | | | |
| | | | | | |
| II. EMERGENCY CONTAC | CT PERSO | N | | | |
| Name: | | | Relationship: | | |
| Mailing Address: | | | | | |
| Home Phone: | Business Phone: | | Mobile Phone: | | |
| | | | | | |
| | | | | | |
| III. EMPLOYMENT INFO | RMATION | | | | |
| Position applying for: | | Date available for work: | | | |
| | | | | | |
| Гуре of employment: [] Full Tii | me | [] Part Time | [] Temporary | | |
| What days and hours if part-time | ? Days_ | From () AM () | Hours To (|) A15 () P15 | |
| | | From () AM (|) PM To (|)AM()PM | |

| | | apn tening now you bed | | | | | |
|--|--|---|------------------------|--------------------|----------------------|--|--|
| Do you atter | | No [] Yes – If yes, f | | | | | |
| Are you a m | nember of OVC | N? [] No [_]Yes – If | yes, date joined: | | | | |
| Have you ev | ver applied for | a job with us before? [|] Yes [] No | | | | |
| Have you ever worked for us before? [] Yes [] No | | | | | | | |
| Have you ev If yes, state | ver been convic date, court and | eted of any crime other place where offense of | than a minor traffic | violation?[] Yes | s [] No | | |
| | | rged or requested to res | | | | | |
| Does your p | Does your present employer know of your plans to change employment? [] Yes [] No | | | | | | |
| Why do you desire to make a change? | | | | | | | |
| Have you ev | ver held a posit | ion of trust (handling n | noney or confidentia | al material?) [] | Yes [] No | | |
| Do you have | e steady transpo | ortation to work?[] Y | es [] No | | | | |
| Are you lega | lly authorized t | to work in the U.S.? |]Yes []No | | | | |
| Referred to u | ıs by: | | | | | | |
| Are you able | to perform the | tasks explained to you nmodation? [] Yes [| in the job description | on you are applyin | | | |
| IV. EDUCA | ATION | | | | | | |
| School | Years Completed | Degree Received & Major Subject | Name of School | Location | Did you Graduate? | | |
| High School | | | | | | | |
| Frade Bus. or Correspondence | | | | | | | |
| College | | | | | | | |
| Graduate School or Seminary | | | | | | | |

| presently enrolled in school, what are you studying? | g or certifications (such as computers, technology, etc.). If you are |
|--|---|
| | ns you possess that you would like to make us aware of? Please |
| V. PREVIOUS EMPLOYMENT | |
| Duties: | Phone: Date of Employment: From to Starting Rate \$ Ending Rate \$ |
| Name and Position of Immediate Supervisor: Your Position: Duties: | Phone: Date of Employment: From to Starting Rate \$ Ending Rate \$ |
| Your Position: | Date of Employment: From to Starting Rate \$ Ending Rate \$ |
| May we contact the employers listed above? Which one(s) do you wish for us NOT to contact? | |

VI. REFERENCES Please list two references. (Do not list relatives or previous supervisors.) Job Title: Phone: Relationship: Address: Name: Job Title: Address: _____ Phone: ____ Relationship: _____ I authorize Oro Valley Church of the Nazarene and its agents to contact any references or employers as listed on my application for employment to confirm the information which was supplied by me and/or obtain other material information about my employment. I authorize all references or employers to release any information about my qualifications. I also release any references or employers which provides information from any and all liability for providing that information. I hereby confirm that all statements herein are true and correct to the best of my knowledge. I authorize this church and/or its agents to conduct whatever investigation it deems necessary to confirm statements submitted on this application. I understand that any false, misleading or incomplete statements herein may be cause for disqualification or dismissal, if employed. I understand that this application is not intended to be either a contract of employment or a guarantee of promotional opportunities. I understand that just as I am free to resign at any time, the church and/or its agents reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the church has the authority to make any assurances to the contrary. Should you be considered further as a candidate for employment, a background will be required. Drug screening may be required. Screening authorizations will be issued to you at time of employment. Date: _____ Signature:

(Please Print Name)