



# EMPLOYMENT APPLICATION

Mail to: 340 104th Ave, Holland, MI 49423  
Fax to: 616.395.2642 (Attn: Business Office)  
Email to: hr@fearlessfollower.org

Date: \_\_\_\_\_

Position Desired: \_\_\_\_\_

How heard about position \_\_\_\_\_

## PERSONAL INFORMATION

Name \_\_\_\_\_  
Last First Middle Maiden

Address \_\_\_\_\_  
Street City Zip code

Phone Number \_\_\_\_\_ Cell Number \_\_\_\_\_

Email address \_\_\_\_\_

## OTHER INFORMATION

Have you ever been convicted of a crime or are you presently charged with a felony? Q Yes      Q No

If yes, please explain: \_\_\_\_\_

Have you previously applied for a position at, been employed by, or been denied employment within the Fearless Network of Churches? Q Yes      Q No

If yes, please list what positions/dates \_\_\_\_\_

Have you previously applied for, been placed in, or been denied a volunteer position within the Fearless Network of Churches? Q Yes      Q No

If yes, please list positions/dates \_\_\_\_\_

## EDUCATION, TRAINING AND EXPERIENCE

SCHOOL/DEGREE	NAME AND ADDRESS	# YEARS COMPLETED
High School	_____	_____
	<small>Name/Location</small>	
College/University	_____	_____
	<small>Name/Location</small>	<small>Degree/Course of Study</small>
Vocational/Business	_____	_____
	<small>Name/Location</small>	<small>Degree/Course of Study</small>
Bible School/Seminary	_____	_____
	<small>Name/Location</small>	<small>Degree/Course of Study</small>

## REFERENCES (not related to you and whom you have known for at least one year)

Name	Address	Phone	Relationship	Years Known
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**EMPLOYMENT HISTORY (please do not substitute a resume for this section)**

List below all present and past employment starting with you most recent employer (last 5 years is sufficient). Account for all periods of unemployment.

Name of Employer \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip code

Type of work: \_\_\_\_\_ Phone Number \_\_\_\_\_

Your Supervisor's Name \_\_\_\_\_ May we contact this supervisor for a reference?  Yes  No

Your Position and Duties: \_\_\_\_\_ Rate of Pay (start/end) \_\_\_\_\_

Dates of Employment (start/end) \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

.....  
Name of Employer \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip code

Type of work: \_\_\_\_\_ Phone Number \_\_\_\_\_

Your Supervisor's Name \_\_\_\_\_ May we contact this supervisor for a reference?  Yes  No

Your Position and Duties: \_\_\_\_\_ Rate of Pay (start/end) \_\_\_\_\_

Dates of Employment (start/end) \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

.....  
Name of Employer \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip code

Type of work: \_\_\_\_\_ Phone Number \_\_\_\_\_

Your Supervisor's Name \_\_\_\_\_ May we contact this supervisor for a reference?  Yes  No

Your Position and Duties: \_\_\_\_\_ Rate of Pay (start/end) \_\_\_\_\_

Dates of Employment (start/end) \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

**ACKNOWLEDGEMENT**

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States. I understand that this application in no way constitutes an agreement or contract for employment and that no Fearless Network of Churches employee or representative is authorized to make any assurances to the contrary. I also understand and acknowledge that the Fearless Network of Churches is an "at will" employer which means that any employment relationship and all related benefits and compensation may be terminated at any time, with or without cause and with or without notice, by either Fearless Network of Churches or myself.

I hereby certify that all of the information provided by me in this application and any accompanying documentation is correct, accurate, and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in these documents will result in denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



# INFORMATION RELEASE FORM

Date: \_\_\_\_\_

## PERSONAL INFORMATION

Name \_\_\_\_\_  
Last First Middle

Other Legal Names (Maiden, a.k.a.) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Driver's License Number \_\_\_\_\_ Issuing State \_\_\_\_\_

Email address \_\_\_\_\_

## EMPLOYMENT INFORMATION

I expressly authorize the references I have provided, including those that are personal, professional, and current/previous employers of mine, to:

1. Verify the accuracy of information provided by me in the attached employment application, and
2. provide Fearless Network of Churches employees, representatives, or agents with all information concerning my previous employment, any disciplinary information, and/or any pertinent personal information.

I release all parties from all liability for any damage that may result from furnishing information to you. In addition, I hereby waive written notice to me that employment information is being provided by any person or organization.

## BACKGROUND INFORMATION

I hereby consent to:

1. Verification of all information provided on this form or the attached application furnished by me, and
2. a comprehensive review of my background which may include, but is not limited to, addresses, social security number, criminal history, vehicle driving records, worker's compensation records, credit history, professional licenses, education background, and employment history.

I understand that the verification of all information provided and a comprehensive review of my background are a condition of employment consideration and/or continued employment.

I understand that the information will be obtained in accordance with the Fair Credit Reporting Act and all other applicable laws.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_



### Fearless Network of Churches

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