

## **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 INFORMA	ATION			
Name	First	Middle	Maiden	
	Tillot		Zip code	
			Zip tode	
Email address				
OTHER INFORMATIO				
	·			
Have you ever been convi	cted of a crime or are you presently ch	narged with a felony?	q <b>Ye</b> s	q <b>No</b>
If yes, please explain:				
	ed for a position at, been employed b	y, or been denied	q Yes	q <b>No</b>
employment within the Fe	earless Family of Churches?		9 163	9110
If yes, please list what position	tions/dates			
	ed for, been placed in, or been denied	la volunteer position	q Yes	q <b>No</b>
within the Fearless Family	of Churches?			
If yes, please list positions/				
EDUCATION, TRAINII	NG AND EXPERIENCE			
SCHOOL/DEGREE	NAME AND ADDRESS			# YEARS COMPLETED
High School	Name/Location			
College/University				
Vocational/Business	Name/Location	Degree/Course of Study		
Bible School/Seminary	Name/Location	Degree/Course of Study		
biole serioon serimary	Name/Location	Degree/Course of Study		
REFERENCES (not rel	ated to you and whom you hav	e known for at least one year)		
MET ENERVOES (HOTTE	area to you area whom you hav	Came and the reast one year)		
Name	Address	Phone	Relationship	Years Known
Name	Address	Phone	Relationship	Years Known
Name	Address	Phone	Relationship	Years Known

List below all present and past employment starting unemployment.	with you most recent employer (last 5 years is sufficient). Account for all periods of	
Name of Employer		
Address	City Zip code	
Typeofwork:	Phone Number	
Your Supervisor's Name	Maywecontactthissupervisorforareference? q Yes No	
Your Position and Duties:	Rate of Pay (start/end)	
Dates of Employment (start/end)	Reason for Leaving	
Address	City Zip code	
	Phone Number	
Your Supervisor's Name	Maywe contact this supervisor for a reference? Yes No	
Your Position and Duties:	Rate of Pay (start/end)	
Dates of Employment (start/end)	ReasonforLeaving	
A 11	City Zip code	
	Phone Number	
Your Supervisor's Name	Maywecontactthis supervisor for a reference? Yes No	
Your Position and Duties:	Rate of Pay (start/end)	
Dates of Employment (start/end)	Reason for Leaving	
ACKNOWLEDGEMENT		

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

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 Family of Churches employee or representative is authorized to make any assurances to the contrary. I also understand and acknowledge that the Fearless Family 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 Family 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 RELEASEFORM

Date:	
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Name			
Last	First	Middle	
Other Legal Names (Maiden,	a.k.a.)		
Date of Birth	Driver's License Numbe	er	Issuing State
Email address			

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 Family 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 Family of Churches

340 104TH AVENUE • HOLLAND, MI 49423 616.395.2600 FAX: 616.395.2642 FEARLESSFOLLOWER.ORG