



Application for Employment as Facilities Support Staff

PLEASE PRINT

Personal Information

Name		Date	
Address			
City		State	
Zip Code		Phone	
Position Applied For?			

Basic physical qualifications include:

- † Prolonged periods standing and walking throughout facilities.
- † Must be able to lift up to 45 pounds at times.
- † Must be able to bend, lift, stretch, climb, and crawl to maintain equipment and buildings.
- † Must be able to perform work in a variety of weather conditions.
- † Other duties as needed.

Can you perform the essential functions of the Facilities Support Position for which you applied?

Yes _____ No _____

If no, please explain. (If you have any questions about the above qualifications, please contact us through the church office. A full job description is available.)

When would you be available to begin work?

Are you legally eligible to be employed in the United States? Yes _____ No _____
(Proof of identity and eligibility will be required upon employment.)

Are you over the age of 18 years? Yes _____ No _____
(If no, you may be required to provide authorization to work.)

Have you ever worked for this organization before? Yes _____ No _____

If yes, where?

When? (Give dates)

Job Title:

Do you have any relatives or friends who work for the organization?

Yes _____ No _____

If yes, who and where do they
 work?

Have you ever done any volunteer work? Yes _____ No _____

If yes, describe: (Omit any volunteer work which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities)

Are you available to work: (Check all that apply.)

DAYS _____ NIGHTS _____ WEEKENDS _____ FULL TIME _____

If you cannot work full time, please explain:

Days and Hours Available: (If employed, notification must be provided in writing should availability change.)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From							
To							

Are you presently employed? Yes _____ No _____

If yes, may we contact your employer? Yes _____ No _____

If presently employed, why are you considering leaving?

Account for any full month since leaving school (high school or college) that you were not working:

	From	To	Reason
Mo/Year			
Mo/Year			
Mo/Year			

Education Information

	Name and Location of School	Course of Study	Number of Years Completed	Diploma or Degree Received
High School				
College				
Vocational or Trade School				
Graduate				

Employment

Start with your current or most recent position

Employer #1		Phone Number	
Full Address			
Supervisor Name			
Supervisor Title			
	From: Month/Day/Year	To: Month/Day/Year	
Dates Employed			
Describe the Work Performed			

Employer #2		Phone Number	
Full Address			
Supervisor Name			
Supervisor Title			
	From: Month/Day/Year	To: Month/Day/Year	
Dates Employed			
Describe the Work Performed (next page)			

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Employer #3		Phone Number	
Full Address			
Supervisor Name			
Supervisor Title			
	From: Month/Day/Year	To: Month/Day/Year	
Dates Employed			
Describe the Work Performed			

Personal References

Give three references (not relatives or employers)

Name		Occupation	
Work Phone		Mobile	
Full Address			

Name		Occupation	
Work Phone		Mobile	
Full Address			

Name		Occupation	
Work Phone		Mobile	
Full Address			

We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.



IMPORTANT: PLEASE READ AND SIGN

I understand that failure to reveal any prior employer or giving false or misleading information by me on any part of this Application for Employment can result in disqualification for employment consideration or, if hired, may be grounds for termination from the organization. I understand that if I am hired, my employment is for no definite time and may be terminated at any time without prior notice.

Applicant Signature	Date
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Thank you for completing this application. Please return it to the church office either by surface mail, email, or in person.

Fountain City United Methodist Church
 212 Hotel Road, Knoxville, TN 37918
 865-689-5175, spirit@fountaincityumc.org

Applicant: Do not write below this line

RESULTS

Employed: Yes _____ No _____

If yes, Job Title		Department	
Date of Hire		Compensation	\$ _____ per _____

Interviewed by	Date
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