

GRACE BIBLE CHURCH CUSTODIAN EMPLOYMENT APPLICATION

NOTICE TO ALL APPLICANTS

You are not required to give information on this form where such information is expressly prohibited by Federal, State or local laws and the applicant may exclude those responses that may indicate race, creed, sex, marital status, age, color, national origin, disabilities, military status, ethnicity or union affiliation.

Our employment practices are in full accord with State and Federal laws, which prohibit discrimination because of race, color, age, sex, national origin, membership and activities on behalf of a labor organization, disabilities, or ethnicity.

Important! Incomplete applications will not be considered for employment with Grace Bible Church. If a question does not apply to you, print NA, which means "not applicable". False or misleading statements on this employment application will result in its removal from consideration for any current or future employment opportunities with Grace Bible Church.

(Please Print or Type)

Position Applied For P/T Custodian	Date of Application
Name (Last, First, Middle)	
Street Address	City
	State
	ZIP Code
Telephone Number(s) Home:	E-mail
Cell:	

If you are under 18 years of age, can you provide required proof of your eligibility to work?	<input type="checkbox"/> yes <input type="checkbox"/> n/a <input type="checkbox"/> no
Have you ever filed an application with us before?	<input type="checkbox"/> yes <input type="checkbox"/> no
Have you ever been employed with us before?	<input type="checkbox"/> yes <input type="checkbox"/> no
Are you currently employed?	<input type="checkbox"/> yes <input type="checkbox"/> no
May we contact your present employer?	<input type="checkbox"/> yes <input type="checkbox"/> no
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <i>(Proof of citizenship or immigration status will be required upon employment)</i>	<input type="checkbox"/> yes <input type="checkbox"/> no
On what date would you be available for work?	/ /
Wage expected?	\$ hr/mo/yr <i>(Circle one)</i>
Are you currently on "lay-off" status and subject to recall?	<input type="checkbox"/> yes <input type="checkbox"/> no
Can you travel if a job requires it?	<input type="checkbox"/> yes <input type="checkbox"/> no
Have you been convicted of a felony? <i>(Conviction will not necessarily disqualify an applicant from employment)</i>	<input type="checkbox"/> yes <input type="checkbox"/> no
Do you agree with Grace Bible Church's doctrinal statement? Please note any disagreements on a separate sheet of paper.	<input type="checkbox"/> yes <input type="checkbox"/> no
If you are a referral, who referred you to us?	

EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
College				
Other <i>(please specify)</i>				
Other <i>(please specify)</i>				

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, gender, national origin, disabilities or other protected status.

Employer		<u>Dates Employed</u>		Work Performed
Address		From	To	
Telephone Number(s)		<u>Hourly Rate/Salary</u>		
Job Title		Starting	Final	
Supervisor				
Reason for Leaving				
Employer		<u>Dates Employed</u>		Work Performed
Address		From	To	
Telephone Number(s)		<u>Hourly Rate/Salary</u>		
Job Title		Starting	Final	
Supervisor				
Reason for Leaving				
Employer		<u>Dates Employed</u>		Work Performed
Address		From	To	
Telephone Number(s)		<u>Hourly Rate/Salary</u>		
Job Title		Starting	Final	
Supervisor				
Reason for Leaving				
Employer		<u>Dates Employed</u>		Work Performed
Address		From	To	
Telephone Number(s)		<u>Hourly Rate/Salary</u>		
Job Title		Starting	Final	
Supervisor				
Reason for Leaving				

If you need additional Space, please check here and continue on a separate sheet of paper.

ADDITIONAL INFORMATION

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience. Especially skills in areas other than the primary skill applied for on this application (multi-skill).

Special Licenses

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING (refer to the attached job description). Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the activities involved in the job or occupation for which you have applied?

yes no

REFERENCES: Give the names of three persons not related to you, whom you have known at least one year. At least one MUST be a professional reference from a co-worker/supervisor at the same place of employment. At least one MUST be from an elder currently serving in your church. (professional and elder references “may” be the same, if you are currently employed in a church)

NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

POSITION: _____ TELEPHONE #: _____

NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

POSITION: _____ TELEPHONE #: _____

NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

POSITION: _____ TELEPHONE #: _____

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand that my employment relationship may not be changed by any written document or by conduct unless such changes are specifically acknowledged in writing by an officer of this organization.

I understand that incomplete employment applications will not be considered. Incomplete does not include any information on this form where such information is expressly prohibited by Federal, State or local laws and where the applicant may exclude those responses that may indicate race, creed, sex, marital status, age, color, national origin, disabilities, military status, ethnicity or union affiliation.

I hereby understand and acknowledge that if employed, my first 180 days with the company shall be considered as a probationary period during which time I may be discharged for any reason with or without cause.

In the event of employment, I understand that, if hired, false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer. Any offer of employment tendered to the applicant by this company is conditional and may be contingent upon successful completion of checking background information.

In the event of employment in a position required to drive a company vehicle, I understand that the company will be requesting through Grace Bible Church's insurance provider a print out of your Department of Motor Vehicle report. This information will be used to determine availability of insurance coverage. I understand that initial and continued employment is dependent upon availability of insurance coverage. Employees have the right to dispute the accuracy or completeness of Department of Motor Vehicle reports.

The signature below authorizes Grace Bible Church or its insurance provider to request a copy of my Department of Motor Vehicle report and acknowledges that I agree to the terms of this application.

Signature of Applicant

Date

Please attach the following and submit to the address below. The Personnel Committee will begin screening applications as soon as possible. The position becomes available immediately.

- Letter of Introduction/Statement of Interest
- Personal Testimony of the Work of Jesus Christ in Your Life
- This Employment Application (including additional pages, if needed)
- Your Personal Resume
- Consent for Background Investigation Application
- Copy of Your Driver's License

GRACE BIBLE CHURCH
3625 S 19th Avenue
Bozeman MT 59718

Applications must be submitted by email to: matthewb@gbcmt.org