

North Florida Baptist Church, Inc.

Employment Application

Date: _____

This application must be completed even if attaching a Personal Resume.

PERSONAL			
Name: <i>Please PRINT or TYPE: Last Name, First Name, Middle Initial</i>		Social Security No.:	
Address: <i>Street Number and Name, City, State, Zip</i>		How long have you lived in this city and state?	
Do you have a valid Driver's License? <input type="checkbox"/> yes <input type="checkbox"/> no	Are you available to work <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Shift work <input type="checkbox"/> Temporary	Home Phone No.: ()	Business Phone No.: ()
Can you travel? <input type="checkbox"/> yes <input type="checkbox"/> no			
Have you ever filed an application with NFB before? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, explain _____	Are you under contract at the present time? <input type="checkbox"/> yes <input type="checkbox"/> no	E-mail Address:	
Have you previously worked for NFB Ministries? <input type="checkbox"/> yes <input type="checkbox"/> no	Do you have any relatives working for NFB Ministries? <input type="checkbox"/> yes <input type="checkbox"/> no <i>If yes, please list name(s) and relationship(s):</i>		
Date available for employment:	Name	Relationship	
Church Affiliation: <i>Church Name and Address</i>	Name	Relationship	

POSITION DESIRED			
<i>Indicate positions for which you are applying in order of preference by number sequence (1, 2, 3, etc.)</i>			
<input type="checkbox"/> Preschool	<input type="checkbox"/> School Supervision (Master's Degree required)	For grades 7-12, list preference of subjects:	
<input type="checkbox"/> Elementary Teacher (grades 5K-1)	<input type="checkbox"/> School Administration (Master's Degree required)	1. _____	
<input type="checkbox"/> Elementary Teacher (grades 2-3)	<input type="checkbox"/> Transportation or Food Service	2. _____	
<input type="checkbox"/> Elementary Teacher (grades 4-5)	<input type="checkbox"/> Church Administration _____	3. _____	
<input type="checkbox"/> Middle School Teacher (grade 6)	<input type="checkbox"/> Maintenance/Grounds		
<input type="checkbox"/> Middle School Teacher (grades 7-8)	<input type="checkbox"/> Office/Clerical		
<input type="checkbox"/> Senior High Teacher (grades 9-12)	<input type="checkbox"/> A.M. Shift <input type="checkbox"/> P.M. Shift - Housekeeping		
	<input type="checkbox"/> Other _____		
What prompted your application to NFB/NFC?	<input type="checkbox"/> Advertisement (<i>please identify source</i>) _____		
<input type="checkbox"/> Walk-in	<input type="checkbox"/> Employee Referral		
	<input type="checkbox"/> Other (<i>please specify</i>) _____		

EDUCATION AND TRAINING					
Indicate Last Level of Education Completed:	High School <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 Year of Graduation _____	College of University <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Year of Graduation _____	Graduate School <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		
Name of High School/College	Location	City/State	Major	Minor	Degree

EMPLOYMENT HISTORY

Employer	Employment Dates From _____ to _____	Hourly or Monthly Salary Start _____ Finish _____
Immediate Supervisor	E-mail Address	What was your job title?
Address: <i>Street Number and Name, City, State, Zip</i>	Telephone No. ()	Fax No. ()
Description of duties:	Did you work under another name? <input type="checkbox"/> yes <input type="checkbox"/> no	
	If yes, what name?	
	May we contact this employer? <input type="checkbox"/> yes <input type="checkbox"/> no	
Reason for leaving:		
Account for period between jobs:		
Employer	Employment Dates From _____ to _____	Hourly or Monthly Salary Start _____ Finish _____
Immediate Supervisor	E-mail Address	What was your job title?
Address: <i>Street Number and Name, City, State, Zip</i>	Telephone No. ()	Fax No. ()
Description of duties:	Did you work under another name? <input type="checkbox"/> yes <input type="checkbox"/> no	
	If yes, what name?	
	May we contact this employer? <input type="checkbox"/> yes <input type="checkbox"/> no	
Reason for leaving:		
Account for period between jobs:		
Employer	Employment Dates From _____ to _____	Hourly or Monthly Salary Start _____ Finish _____
Immediate Supervisor	E-mail Address	What was your job title?
Address: <i>Street Number and Name, City, State, Zip</i>	Telephone No. ()	Fax No. ()
Description of duties:	Did you work under another name? <input type="checkbox"/> yes <input type="checkbox"/> no	
	If yes, what name?	
	May we contact this employer? <input type="checkbox"/> yes <input type="checkbox"/> no	
Reason for leaving:		
Account for period between jobs:		

REFERENCES

Please list three references who are qualified to speak of your home background, Christian life, training and experience.

(May not be a family member).

Name _____ Position _____
Address _____ E-mail Address _____
City, State, Zip _____ Telephone No. () _____

Name _____ Position _____
Address _____ E-mail Address _____
City, State, Zip _____ Telephone No. () _____

Name _____ Position _____
Address _____ E-mail Address _____
City, State, Zip _____ Telephone No. () _____

MISCELLANEOUS

Please list any other skills you have:

Typing -- wpm _____

Ten-key adding machine

Software usage: Word Perfect Microsoft Word PageMaker Lotus

Other _____

If you are not a U.S. citizen, are you legally authorized to work in the United States? yes no
(If yes, you must complete the I-9 Form required by the Immigration and Naturalization Service no later than three (3) business days after your date of hire).

Have you ever been convicted of a felony? yes no

If yes, please explain

Have you been bonded? yes no

If yes, for which position(s) _____

In case of accident or emergency, please notify:

Name _____ Address _____ Telephone No. _____ Relationship _____

MISCELLANEOUS continued

If your employment requires, are you willing to join, regularly attend and work with North Florida Baptist Church in proclaiming the Gospel of the Grace of God?

Please write a brief statement of your testimony of receiving Jesus Christ as Savior *(please be specific and complete)*

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information or omission of facts herein will be cause for my dismissal. I hereby authorize the ministry to investigate my record with my former employers, personal references and other background investigation, and release the ministry and informants from all liability whatsoever from such an investigation.

Applicant's Signature

Date

In consideration of my employment, I agree to conform to the rules, regulations, policies and procedures of the ministry. I understand that, if employed, my employment will not be for a stated period and my employment can be terminated with or without cause and with or without notice at any time at the option of either the ministry or myself.

Applicant's Signature

Date

THIS APPLICATION WILL REMAIN ACTIVE FOR THREE MONTHS FROM THIS DATE. APPLICANT MUST NOTIFY THE MINISTRY IN WRITING WITHIN NINETY DAYS IF HE/SHE WANTS THIS APPLICATION TO REMAIN ACTIVE FOR AN ADDITIONAL NINETY DAYS.

**North Florida Baptist Church
Attention: Personnel Director
3000 N Meridian Rd.
Tallahassee, FL 32312**

**Phone: 850/386-6327 ext. 181
Fax: 850/385-7188**