

Lakeview Christian School

5318 S. Western Ave, Marion, Indiana, 46953

(765) 677-4266

office@lakeviewchristian.net

Employment / Job Application

PERSONAL INFORMATION

FULL NAME: _ _ _ _ _ DATE: _ _ _ _ _

ADDRESS: _ _ _ _ _

CITY: _ _ _ _ _ STATE: _ _ _ _ _ ZIP CODE: _ _ _ _ _

E-MAIL: _ _ _ _ _ PHONE: _ _ _ _ _

DATE AVAILABLE: _____

DESIRED PAY: \$ _____ Hourly Salary

POSITION APPLIED FOR: _____

EMPLOYMENT DESIRED: FULL-TIME PART-TIME

EMPLOYMENT ELIGIBILITY

ARE YOU A U.S. CITIZEN?

*IF NO, ARE YOU ALLOWED TO WORK IN THE USA

HAVE YOU EVER WORKED FOR THIS EMPLOYER?

*IF YES, WRITE THE START AND END DATES: _ _ _ _ _

EDUCATION

HIGH SCHOOL:

CITY/STATE

HIGH SCHOOL: _ _ _ _ _ CITY / STATE: _ _ _ _ _

FROM: _ _ _ _ _ TO: _ _ _ _ _

GRADUATE?

DIPLOMA: _ _ _ _ _

COLLEGE: CITY/STATE:

FROM: _ _ _ _ _ TO: _ _ _ _ _

GRADUATE?

DEGREE: _ _ _ _ _

OTHER: _ _ _ _ _ CITY/STATE:

FROM: _ _ _ _ _ TO: _ _ _ _ _

OTHER: _ _ _ _ _ CITY/STATE:

FROM: _ _ _ _ _ TO: _ _ _ _ _

EMPLOYMENT HISTORY

EMPLOYER #1: _ _ _ _ _

E-MAIL: _ _ _ _ _ PHONE: _ _ _ _ _

ADDRESS: _ _ _ _ _

CITY: _ _ _ _ _ STATE: _ _ _ _ _ ZIP CODE: _ _ _ _ _

STARTING PAY: \$ _____ Hourly Salary

ENDING PAY: \$ _____ Hourly Salary

JOB TITLE: _ _ _ _ _ RESPONSIBILITIES: _ _ _ _ _

STARTING DATE: _ _ _ _ _ ENDING DATE: _ _ _ _ _

REASON FOR LEAVING: _ _ _ _ _

EMPLOYER#2: _____

E-MAIL: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

STARTING PAY: \$ _____ Hourly Salary

ENDING PAY: \$ _____ Hourly Salary

JOB TITLE: _____ RESPONSIBILITIES: _____

STARTING DATE: _____ ENDING DATE: _____

REASON FOR LEAVING:

EMPLOYER#3: _____

E-MAIL: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

STARTING PAY: \$ _____ Hourly Salary

ENDING PAY: \$ _____ Hourly Salary

JOB TITLE: _____ RESPONSIBILITIES: _____

STARTING DATE: _____ ENDING DATE: _____

REASON FOR LEAVING:

REFERENCES

PLEASE INCLUDE 1 PASTORAL REFERENCE

REFERENCE #1: _____ RELATIONSHIP: _____

COMPANY: _____ TITLE: _____

E-MAIL: _____ PHONE: _____

REFERENCE #2: _____ RELATIONSHIP : _____

COMPANY: _____ TITLE: _____

E-MAIL: _____ PHONE: _____

REFERENCE #3: _ _ _ _ _ RELATIONSHIP: _____

COMPANY: _ _ _ _ _ TITLE: _____

E-MAIL: _ _ _ _ _ PHONE: _____

PERSONAL TESTIMONY

PLEASE PROVIDE YOUR PERSONAL TESTIMONY OF FAITH:

MILITARY SERVICE

ARE YOU A VETERAN? YES NO

BRANCH: _ _ _ _ _ RANK AT DISCHARGE: _____

STARTING DATE: _ _ _ _ _ ENDING DATE: _____

TYPE OF DISCHARGE: _____

IF NOT HONORABLE, PLEASE EXPLAIN: _____

BACKGROUND CHECK CONSENT

ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK? YES NO

DISCLAIMER

Lakeview Christian School does not discriminate on the basis of race, color, national or ethnic origin.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

SIGNATURE _ _ _ _ _ **DATE:** _____