

APPLICATION FOR EMPLOYMENT

Matthew 25 Ministries

PERSONAL INFORMATION as it appears on your Social Security card

Name (Last)	(First)	(Middle Initial)	Date of Application
Address (Street)			
(City)	(State)	(Zip)	
Home Phone Number ()	Work Phone Number ()	May we contact you at work? Yes No	Social Security Number
In case of emergency, notify (name & phone number):		Are you over 18 years old? (Yes / No)	
Are you authorized to work in the U.S.? Yes No			

EDUCATION & SKILLS

Please list all education beginning with the most recent. Indicate a diploma or degree, if completed, including GED if obtained.

Name & Location of School	# of yrs. Complete	Graduated	Degree & Major
College		(Circle one) Yes No If no, approx. number of credit hours completed:	
Other		Yes No If no, approx. number of credit hours completed	
Other		Yes No If no, approx. number of credit hours completed	
High School/GED		Yes No If no, approx. number of credit hours completed	

OFFICE/COMPUTER SKILLS (Circle those that apply)

Word Processing Presentation Software Spreadsheets Other _____

OTHER SKILLS/CERTIFICATIONS (Circle those that apply)

Certified Lifeguard Certified CPR or First Aid Groundskeeping Maintenance
Camp Counselor Cook/Server Other _____

OTHER SKILLS/CERTIFICATIONS List specialized skills/credentials:

CRIMINAL RECORD

Have you ever been convicted of a crime? If so, list nature of offense, date of conviction, and disposition (sentence, probation, etc.)

Complete other side

EMPLOYMENT HISTORY: List all employment including military and volunteer service **starting with the most current position held**. You may attach a resume, **but you must complete the employment section**. This information will be used in **reference** checks.

Dates Employed (month/year) From: _____ To: _____		Position Title	
Salary Start: \$ / _____ Final: \$ / _____		Organization Name/Address	
_____ Full-time _____ Part-time, hrs/wk			
May we contact for references Yes _____ No _____		Supervisor's Name/Title/Phone:	Reason For Leaving:
Duties:			
Dates Employed (month/year) From: _____ To: _____		Position Title	
Salary Start: \$ / _____ Final: \$ / _____		Organization Name/Address	
_____ Full-time _____ Part-time, hrs/wk			
May we contact for references Yes _____ No _____		Supervisor's Name/Title/Phone:	Reason For Leaving:
Duties:			
Dates Employed (month/year) From: _____ To: _____		Position Title	
Salary Start: \$ / _____ Final: \$ / _____		Organization Name/Address	
_____ Full-time _____ Part-time, hrs/wk			
May we contact for references Yes _____ No _____		Supervisor's Name/Title/Phone:	Reason For Leaving:
Duties:			
Dates Employed (month/year) From: _____ To: _____		Position Title	
Salary Start: \$ / _____ Final: \$ / _____		Organization Name/Address	
_____ Full-time _____ Part-time, hrs/wk			
May we contact for references Yes _____ No _____		Supervisor's Name/Title/Phone:	Reason For Leaving:
Duties:			

PLEASE READ CAREFULLY I certify that the above statements are correct. I understand that **any** false information (or omissions) in this application, or its supporting documents, will be sufficient grounds for refusal to hire me or termination without notice. I agree to comply fully with the Matthew 25 Ministries Work Rules that have been provided to me. I understand that failure to comply with these rules may be grounds for dismissal. I further understand that Matthew 25 Ministries has the right to review and investigate my education, previous employment, driving, and criminal records and other background data. All information on this application will be kept strictly confidential.

APPLICANT'S SIGNATURE: _____ DATE: _____