



APPLICATION FOR EMPLOYMENT

Date \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 (Last) (First) (Middle)

Address \_\_\_\_\_  
 (Street) (City) (State) (Zip)

Email: \_\_\_\_\_

If you are under 18 years of age can you provide a work permit? \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Position(s) Applying For \_\_\_\_\_

How did you learn of this opening? \_\_\_\_\_ Date available for work: \_\_\_\_\_

Type of employment desired (note all that apply):  
 Full-time Part-time Evenings Days  
 Weekends Nights Seasonal/Temporary

AVAILABILITY: Please indicate the times that you are usually available for work.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

**EDUCATION INFORMATION**

Please circle the last year of school that you completed: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16+

Did you complete high school?: YES \_\_\_ NO \_\_\_ DIPLOMA? YES \_\_\_ NO \_\_\_ GED? YES \_\_\_ NO \_\_\_

Name of last high school attended: \_\_\_\_\_ City & State: \_\_\_\_\_

Are you currently a student? YES \_\_\_ NO \_\_\_ Full Time \_\_\_ Part Time \_\_\_ Focus of studies: \_\_\_\_\_

Are you planning to pursue further studies? YES \_\_\_ NO \_\_\_ Explain: \_\_\_\_\_

List other certifications, licenses, or specialized training: \_\_\_\_\_

	Name	City/State	Course of Study	Years Attended	Did you Graduate	Degree Certification
College						
College						
Business, Tech or Trade						
Other						

## EMPLOYMENT HISTORY

List below your last four employers. Please begin with your current or most recent job first.

1. EMPLOYER: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address (City & State): \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_  
(mo/yr) (mo/yr)

Describe your duties and responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone No. /Extension: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

2. EMPLOYER: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address (City & State): \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_  
(mo/yr) (mo/yr)

Describe your duties and responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone No. /Extension: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

3. EMPLOYER: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address (City & State): \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_  
(mo/yr) (mo/yr)

Describe your duties and responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone No. /Extension: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

4. EMPLOYER: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address (City & State): \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_  
(mo/yr) (mo/yr)

Describe your duties and responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone No. /Extension: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Please write the number(s) of any employer(s) you do not want us to contact: \_\_\_\_\_

If your name has changed or you have gone by another name during any periods of employment, please list name(s):

Can you, upon conditional offer of employment, provide genuine documentation establishing identity and eligibility to be legally employed in the United States? \_\_\_\_\_

## REFERENCES

*List three personal references not related to you.*

Name	Phone Number		Occupation	Years Known

**Please use the space below to share your Christian testimony; you may use additional paper as needed.**

## APPLICANT'S CERTIFICATION

I hereby certify that the information contained in this application form is true and correct to the best of my knowledge and agree to have any of the statements checked by the Bread of Life Mission or any of its agents unless I have indicated on this form to the contrary.

I understand and agree that:

- Any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, in my dismissal from employment.
- All offers of employment are conditioned on: 1) the provision of satisfactory proof of an applicant's identity and legal authority to work in the USA; 2) the ability to successfully pass a drug test; and 3) the willingness and ability to authorize and pass a criminal background investigation.
- A routine inquiry may be made during the processing of this application and I authorize Bread of Life Mission and their representatives to consult with administrators/supervisors/references and academic institutions with which I have been associated and with others who may have information bearing on my professional competence.

I release from liability the Bread of Life Mission as well as any and all individuals, corporations or organizations for furnishing such information.

***I understand that because the Bread of Life Mission is a Christian organization whose purpose is to share the gospel of Jesus Christ; employment with Bread of Life Mission is subject to acceptance, agreement, and subscription to the Statement of Faith and Qualifications for Employment upon hire and continuously while employed by the Bread of Life Mission.***

If offered employment and I accept, I agree to conform to the rules and standards of Bread of Life Mission and that my employment and compensation can be terminated AT WILL, with or without cause, and with or without notice, at any time, either at my option or at the option of Bread of Life Mission.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

*The Bread of Life Mission is a 501(c)3, charitable, non-profit, Christian organization. As such, we exercise our legal rights as it relates to discrimination because of an organizational exemption from the prohibitions contained in Title VII of the Civil Rights Act of 1964, amended 1991, concerning religious discrimination in employment. It is the policy of Bread of Life Mission to grant equal opportunities for employment to all qualified individuals without regard to any applicable legally protected status.*

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### For Use by Bread of Life Mission Only

APPLICATION RECEIVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

ROUTED TO: \_\_\_\_\_ DATE: \_\_\_\_\_ POSITION: \_\_\_\_\_

ROUTED TO: \_\_\_\_\_ DATE: \_\_\_\_\_ POSITION: \_\_\_\_\_

HIRE? YES \_\_\_ NO \_\_\_ POSITION: \_\_\_\_\_ START DATE: \_\_\_\_\_

COMMENTS: