

Application for Employment



Faith Fellowship Ministries World Outreach Center

2707 Main Street, Sayreville NJ 08872

Instructions: Complete necessary information. You may be asked to provide additional information on another form. This application will be kept on file. It is to your advantage to periodically check to keep it current and active. Be sure to sign and date the application. Please print clearly.

Last Name _____ First _____ Middle _____

Social Security Number _____ Phone Number (_____) _____

Address _____

City _____ State _____ Zip _____

How long have you lived at this address? _____.

Previous Address _____

City _____ State _____ Zip _____

How did you learn of our organization (please be specific) _____

Position desired: _____ Earnings Expected \$ _____

Would you accept full time work? Yes No Part time work? Yes No Overtime? Yes No

When would you be able to work? _____

Have you ever applied for a position at FFM before? Yes No

If yes, give approximate date(s) of application _____

Have you ever been employed at FFM before? Yes No

If yes, give approximate date(s) and position held _____

Do you have any legal right to be employed in the U.S.? Yes (if yes, proof is required) No

Are you of legal age to work? Yes No

Have you ever been convicted of a criminal offense? Yes No

If yes, give dates, locations and disposition _____

Resume attached? Yes No

In case of emergency notify: Name _____

Address _____ Phone _____.

Voluntary Self Identification Form

The Following information is being gathered not for employment decisions but for record keeping in compliance with Federal Laws. Your responses are strictly voluntary and will help in developing and monitoring our Affirmative Action programs. Any information provided will be kept strictly confidential. If you choose not to answer any of these questions, you will not be subject to any adverse treatment. However, if you choose not to “self-identify”, we are under Federal regulations to maintain race and gender information on the basis of visual or personal knowledge.

If you do not wish to furnish this information, please sign below.

I do not wish to furnish this information:

Signature _____ Date _____

Last Name _____ First _____ Middle _____
:

Gender: Male Female

Race or Origin:

White (not of Hispanic origin)

Asian or Pacific Islander

Black (not of Hispanic origin)

Native American

Hispanic

Alaskan Native

How did you learn about this opening? (Please be specific and list your source where applicable)

Referral: _____

Walk-in

Other: _____

Important

PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THE ATTACHED APPLICATION:

1. Fill out the application completely. Do not leave any blank spaces. If a section does not apply, write

“Not Applicable” or “N/A”.

2. Provide both “Start Dates” and “End Dates” for each past/present employer listed. Do not write “see

resume”.

3. Be sure to sign and date where indicated on the last page of the application.

4. MAKE SURE ALL INFORMATION IS VERIFIABLE (ie. college degrees, dates of employment, etc.)

Personal References

Other than family members or previous employers

1. Name _____ Phone (_____) _____

Address _____

2. Name _____ Phone (_____) _____

Address _____

3. Name _____ Phone (_____) _____

Address _____

What are some of your hobbies, interests: _____

Education:

Type of School	Name and Address of School	Courses Majored In	Circle Last Yr. Completed				Did you Graduate?	Give Degrees
High School	_____	_____	1	2	3	4	_____	_____
College	_____	_____	1	2	3	4	_____	_____
College	_____	_____	1	2	3	4	_____	_____
Grad School	_____	_____	1	2	3	4	_____	_____
Grad School	_____	_____	1	2	3	4	_____	_____
Business or Trade School	_____	_____	1	2	3	4	_____	_____

What part of college expenses did you earn?

None 0-25% 25-50% 50-75% More than 75%

What scholarship or awards did you receive? _____

List scholastic honors, offices held & activities while in school _____

Favorite subjects in school _____

List any other experiences or qualifications which would be beneficial to the company _____

List any other special skills or training _____

Employment

We may contact the employers listed below. Place an "X" by the employer(s) you do not want us to contact. List the most recent employer first.

1. Company Name _____ Phone (____) _____
Address _____ Employed from ____/____/____ to ____/____/____.
Position _____ Reason for leaving _____ Last wage _____
Name of supervisor _____ Phone (____) _____
Describe your work _____
What did you like most about this job? _____
What did you like least about this job? _____

2. Company Name _____ Phone (____) _____
Address _____ Employed from ____/____/____ to ____/____/____.
Position _____ Reason for leaving _____ Last wage _____
Name of supervisor _____ Phone (____) _____
Describe your work _____
What did you like most about this job? _____
What did you like least about this job? _____

3. Company Name _____ Phone (____) _____
Address _____ Employed from ____/____/____ to ____/____/____.
Position _____ Reason for leaving _____ Last wage _____
Name of supervisor _____ Phone (____) _____
Describe your work _____
What did you like most about this job? _____
What did you like least about this job? _____

4. Company Name _____ Phone (____) _____
Address _____ Employed from ____/____/____ to ____/____/____.
Position _____ Reason for leaving _____ Last wage _____
Name of supervisor _____ Phone (____) _____
Describe your work _____
What did you like most about this job? _____
What did you like least about this job? _____

Additional Information

To the Applicant: The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, or national origin. Federal laws also prohibit other types of discrimination, such as age, citizenship, disability, veteran status, attainment of benefits, or participation in union activities.

I understand that the Immigration Reform and Control Act of November 6, 1986 requires me to prove the legality of my residency or citizenship. I am also aware that the failure to provide such proof at the time of request may legally force my termination. I certify that my answers to all the questions on this application and the representations made on my resume are true and correct without reservation. I further affirm that I have no current or former employment with the company or any of its subsidiaries, affiliates, or related companies. I am not an employee, independent contractor, or any other type of relationship with the company or any of its subsidiaries, affiliates, or related companies.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that nothing contained in this employment application or in the granting of an interview is intended to create a contract between me and the company or any of its subsidiaries, affiliates, or related companies.

I understand that no promise, representation or agreement contrary to the foregoing is binding on the company unless made in writing and signed by me and an authorized representative of the company.

Applicant's Signature _____ Date _____