

Application for Employment

Date:	Name:(First)				
Address:	(First)	(1)	Middle)	(Last)	
		State:		Zip:	
Home Phone:					
Business Phone:					
Cell Phone:					
Email Address: _					
Are you 18 years	s of age or older?	Yes □ No □			
Type of Work De Full-Time □	sired: Part-		emporary 🗆		
Are you willing t requires it?	o work other than 8	3:15-4:45 Monday th	rough Friday if	the position	
Will you work ov	ertime/weekends i	f the position requir	es it? Yes	□ No □	
Can you travel if	the position requir	es it? Yes 🗆 🕒 N	lo 🗆		
		Baptist General Con To:			No 🗆
		working for the Con Relation			
Posi	tion:				
Are you legally e	ligible for employm	ent in the United St	ates? Yes 🗆	No □	
_	time and the matte	crime? (Do not an er was completely h Yes No	-	-	. your
If you answered	d yes, was it for a f	felony conviction?	∕es □ No □	3	
If yes, please ex	xplain:				
		Education:	_		
					No 🗆
					No 🗆
_			Grad		No 🗆
		Major:		duate: Yes 🗆	

Employment: (Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.)

Present (or Last) Employer:		Phone:		
Address:		City:State:_	Zip:	
Employment Date:	to	Starting Pay:	Ending Pay:	
Supervisor's Name:				
Position & Job Description:_				
Reason for Leaving:				
Employer:				
Address:		City:State:_	Zip:	
Employment Date:	to	Starting Pay:	Ending Pay:	
Supervisor's Name:				
Position & Job Description:_				
Reason for Leaving:				
Employer:				
Address:		_	_	
Employment Date:	to	Starting Pay:	Ending Pay:	
Supervisor's Name:				
Position & Job Description:				
Reason for Leaving:				
Employer			Dhama.	
Employer:				
Address:				
Employment Date:				
Supervisor's Name:				
Position & Job Description:				
Reason for Leaving:				
	Refere	ences:		
	(Other than family or	r former employers)		
Name:		Address:		
Telephone:	Occupation:		Years Known:	
Name:		Address:		
Telephone:				
	•			
Name:		Address:		
Telephone:				
	-			

Additional Experience: (Please complete all that apply.)

What profession	al job relat	ed licenses o	r certificate	s do you hold	?		
Computer Soft	ware Exp	erience:					
MS Office □	•			MS I	MS Excel □		
MS Publisher 🗆		PowerPoi	nt □	MS Windows □ MS Access □			
$\textbf{MS Outlook} \ \Box \ (inc$	luding email, cal	endar, contacts, et	tc.)				
Other:							
Clerical Skills: Keyboarding spe Dictation: Yes			Ten Key:	by touch \Box	by sight 🛭		
US Military Ser	vice:		Branch:		Specialty: _		
Other special ski							
(This next section is g	eneral informati	on for the Baptist (General Conventi	nformatio on of Oklahoma. Yo in will remain confid	our responses to the	se questions are	
Marital Status:	Single	Engaged	Married	Separated	Divorced	Widowed	
Are you a born-a	gain Christ	ian? Yes 🗆	No □				
Are you a member If no, what church							
Are you currently						No □	
Do you regularly	attend you	ır church ser	vices? Yes	□ No □			
Do you believe the	hat the Bibl	le is inerrant	and authori	tative in all m	natters? Yes	No 🗆	
Do you share the	Gospel wi	th others and	d ask them t	o receive Chr	ist? Yes □	No □	
Do you have any scripture? Yes	trouble wo	orking under	authority, a	ssuming that	authority doe		
Do you use tobac Do you drink alco Do you currently If yes to any of t	oholic beve , or have y	rages? Yes ou in the pas	t, used any	illegal drug?			
Hobbies:							
Please share brie	efly how yo	u came to kn	ow Christ a	s your person	al Savior.		
				-	•		

Conditions of Employment

Please read the following carefully as it constitutes conditions for employment with the Baptist General Convention of Oklahoma.

I certify that the information given by me to the Baptist General Convention of Oklahoma is true, accurate and complete to the best of my knowledge. I understand that any false statement on the application, résumé, or during the interview or hiring process may result in refusal of employment, or if employed, immediate termination from the Baptist General Convention of Oklahoma.

I further certify that I am not engaged in any outside activity or business that could be considered in conflict with the interests of the Baptist General Convention of Oklahoma, nor will I become engaged in any such activity or business if employed.

I authorize the Baptist General Convention of Oklahoma to solicit information regarding my character, general reputation, credit, previous employment and similar background information, and to contact any and all references I have given on my application. I hereby release all parties and persons connected with any such information from all claims, liabilities and damages for any reason arising from the furnishing of such information. If employed, I release the Baptist General Convention of Oklahoma from any liability for future references it may provide regarding my work history at the Convention.

I agree that my employment can be terminated with or without cause, and with or without notice at anytime, at the option of the Baptist General Convention of Oklahoma or myself.

I agree to take any and all tests required that are applicable to the position I am applying for. I further agree to observe all policies and regulations of the Baptist General Convention of Oklahoma.

I agree to protect any and all confidential information I may receive.

I understand that if employed, I will provide timely documentation of identity and employment eligibility in accordance with the Immigration Reform and Control Act. (I-9 Form will be provided.)

Signature of Applicant:	Date:
Please provide the following for background checonly:	ck and employment verification purposes
Social Security Number:	Date of Birth:
Driver's License Number:	State: