



**EMPLOYMENT APPLICATION  
SHILOH UNITED METHODIST CHURCH  
5261 Foley Road  
Cincinnati, OH 45238**

<b>Position(s) Applied For</b>	<b>Date of Application</b>		
<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>	
<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Home Telephone Number</b>	<b>Business Telephone Number</b>		
<b>Email Address</b>	<b>Cell Phone Number</b>		
<b>How Did You Hear About Us?</b> <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Employment Agency <input type="checkbox"/> Current Employee _____ <input type="checkbox"/> Other _____			

Are you legally eligible to work in the United States? YES  NO

*(Proof of eligibility will be required upon offer of employment)*

Are you over the age of 18 years? YES  NO   
*(If no, you may be required to provide authorization)*

Can you with or without reasonable accommodation perform the essential functions of this job? *(If you have any questions about the functions of the job, please ask the interviewer before answering this question.)* YES  NO

Have you ever applied to Shiloh UMC before? *(If yes, please give date.)* \_\_\_\_\_ YES  NO

Have you ever worked for Shiloh UMC before? *(If yes, please give date.)* \_\_\_\_\_ YES  NO

Have you ever been convicted of a felony? *(A conviction will not necessarily disqualify you.)* YES  NO   
 If yes, please explain: \_\_\_\_\_

Do you have a valid driver's license? YES  NO

Do you have reliable transportation? YES  NO

Is anyone related to you employed by SHILOH UNITED METHODIST CHURCH? YES  NO   
 If yes, please give their name and relationship to you. \_\_\_\_\_

What salary or rate of pay do you expect to receive if employed? \_\_\_\_\_ per \_\_\_\_\_

Have you ever been terminated or asked to resign from a job? YES  NO

If yes, please explain. \_\_\_\_\_

On what date would you be available to work? \_\_\_\_\_

Days and Hours Available: (If employed, I will notify my supervisor in writing, should my availability change.)

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

**EDUCATION**

	Name and Location of School	Course of Study or Major	# of Years Completed	Diploma/ Degree
Elementary				
High School				
College				
Graduate				
Vocational				

Please list any academic honors, scholarships, offices held, etc.

Describe any specialized training, apprenticeships, licenses or skills.

Have you received any job-related training in the United States Military? YES  NO

Please give dates and explanation:

**EMPLOYMENT HISTORY** (Begin with current or most recent employer.) Do not exclude any employment. Include any applicable temporary employment attach another sheet if necessary. Previous salaries or wages will not be used to determine compensation at Shiloh UMC.)

Company Name	Employment Dates		Salary		Name and Title of Supervisor
	From	To	Start	End	
Address			\$	\$	
	Describe your duties:				

Phone			
Reason for leaving and explanation			
Company Name	Employment Dates From                  To	Salary Start                  End	Name and Title of Supervisor
Address		\$                  \$	
	Describe your duties:		
Phone			
Reason for leaving and explanation			
Company Name	Employment Dates From                  To	Salary Start                  End	Name and Title of Supervisor
Address		\$                  \$	
	Describe your duties:		
Phone			
Reason for leaving and explanation			
Company Name	Employment Dates From                  To	Salary Start                  End	Name and Title of Supervisor
Address		\$                  \$	
	Describe your duties:		
Phone			
Reason for leaving and explanation			

Please provide any other information that you feel will help us in considering your application for employment.

**REFERENCES (Please list three persons, who are not related to you or previous supervisors, who can provide professional references.)**

Name	Address	Phone Number	Relationship / Occupation	Years Known

**APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION**

**\*PLEASE READ CAREFULLY BEFORE SIGNING\***

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee an employment opportunity. I further understand that, should an offer of employment be extended by Shiloh UMC that such employment with Shiloh UMC is at-will, with no specified duration and may be terminated by either Shiloh UMC or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of Shiloh UMC or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of Shiloh UMC except the Lead Pastor has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the Lead Pastor of Shiloh UMC.

In consideration for employment with Shiloh UMC, if employed, I agree to conform to the rules, regulations, policies and procedures of Shiloh UMC at all times and understand that such obedience is a condition of employment. I understand that due to the nature of Shiloh UMC's business, attendance and punctuality are considered essential requirements of every job at Shiloh UMC and that poor attendance or tardiness will result in disciplinary action including but not limited to termination.

I understand that if offered a position with Shiloh UMC, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand that unsatisfactory result from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to Shiloh UMC and/or any of its representatives, agents or vendors.

I understand that this application is considered current for one year (twelve months). If I wish to be considered for employment after this period I must fill out and submit a new application.

**BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.**

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**Signature**

**Date**

**Name and number of person completing this form if other than applicant:**

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Legal Disclaimer: The Employment Application is intended for informational purposes only, and does not constitute legal information or advice. This information and all HR Support Center materials are provided in consultation with federal and state statutes, and do not encompass other regulations that may exist, such as local ordinances. Transmission of documents or information through the HR Support Center does not create an attorney-client relationship. If you are seeking legal advice, you are encouraged to consult an attorney.