



Shiloh Baptist Church

Application for Employment

PERSONAL INFORMATION – PLEASE PRINT ALL INFORMATION

All applicants must have a desire to serve and extend God's grace to others, be gospel minded, and in a committed relationship with Jesus Christ. Today's Date _____

Name

Last First Middle Initial Date of birth

Present Address

Street City State Zip

Phone Numbers Home () Cell ()

Email Address:

EMPLOYMENT DESIRED

Position: **Praise Team Musician** Date you can start: _____ Desired Salary: _____

WORK EXPERIENCE

Please list your musical experience beginning with your most recent job held?

Name of Employer	Last Supervisor	Dates of Employment	Salary
Address	Phone Number	Job Title	
Reason for leaving (Be Specific)			

May we contact this employer for a reference? Yes No

Name of Employer	Last Supervisor	Dates of Employment	Salary
Address	Phone Number	Job Title	

Reason for leaving (Be Specific)

May we contact this reference? YES NO

Name of Employer	Last Supervisor	Dates of Employment	Salary
Address	Phone Number	Job Title	

Reason for leaving (Be Specific)

May we contact this employer for a reference? YES NO

Name	Telephone Numbers	Occupation	Years Acquainted with You
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QUESTION 1 – Please explain why you would like to work at Shiloh Baptist Church.

QUESTION 2 – Why should Shiloh Baptist Church Praise Team hire you? Please identify any special skills, knowledge and abilities?

QUESTION 3 – Has any employer ever subjected you to disciplinary action, suspended, terminated, or asked you to leave a job or volunteer position on the grounds of any unlawful sexual behavior, or violation of an employer's sexual misconduct or harassment policy? Yes No

QUESTION 4 – Have you ever been charged in civil or criminal proceedings with improprieties regarding children? Yes No

QUESTION 5 – Have you ever been arrested or convicted for any offense? Yes No
If yes, please state nature of the crime(s), and disposition of the case:

QUESTION 6 – Have you ever been treated for substance abuse? Yes No

REFERENCES: Give below the names of two persons not related to you, whom you have known at least one year.

Name	Telephone Numbers	Occupation	Years Acquainted with You
1	Cell:		
	Other:		
2	Cell:		
	Other:		

PHYSICAL RECORD: Do you have any physical condition which may limit your ability to perform the job applied for?

Accommodations can be made for individuals with disabilities. YES NO

*Explain:

I certify that all the information provided by me in connection with my application, is true, complete to the best of my knowledge and belief and made in good faith.

Date

Signature

APPLICANT – DO NOT WRITE BELOW THIS LINE

Interviewed
by

Date:

REMARKS:

Neatness	Rate 1-10	Character	Rate 1-10
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Personality	Rate 1-10	Ability	Rate 1-10
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Hired Position: Will Report: Salary:

Approved: 1.

2.