



Shelby Baptist Association
JOB APPLICATION FORM

Date:

I. PERSONAL DATA			
Name (Last):	(First):	(Middle):	
Street Address:		Mailing Address (if different):	
City:	State:	Zip:	
Day telephone number:		Night telephone number:	
E-mail Address:			
II. EDUCATION			
High School:		City, State:	Graduation Date:
Extracurricular Activities:			
University or College:		City, State:	
Intended Major(s):		Intended Minor(s):	
Hours Currently Enrolled:	Hours Completed:	Graduation Date:	
Extracurricular Activities:			
University or College:		City, State:	
Intended Major(s):		Intended Minor(s):	
Hours Currently Enrolled:	Hours Completed:	Graduation Date:	
Extracurricular Activities:			
University or College:		City, State:	
Intended Major(s):		Intended Minor(s):	
Hours Currently Enrolled:	Hours Completed:	Hours Currently Enrolled:	
Extracurricular Activities:			
III. EMPLOYMENT HISTORY (Start with present or most recent job. Use more paper as needed)			
Employer:		Address:	
Start Date:	End Date:	Monthly Salary or Hourly Rate:	
Type of Work Performed:			
Reason(s) for Leaving:			
Employer:		Address:	
Start Date:	End Date:	Start Date:	
Type of Work Performed:			
Reason(s) for Leaving:			
Employer:		Address:	
Start Date:	End Date:	Start Date:	
Type of Work Performed:			
Reason(s) for Leaving:			

Name:	Date:
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IV. JOB SKILLS (List areas in which you have had experience, skills or training)

1. List areas in which you have had experience, skills, and/or training:

2. Computer Software Proficiency:

Software	0 No Experience	1 Basic Competency	2 Highly experienced	3 Certified User
Microsoft Word				
Microsoft Publisher				
Microsoft Excel				
Microsoft Access				
Google Calender				
Google Docs				
Google Photos				
Charity Tracker				
Other:				
Other:				
Other:				

V. CHURCH MEMBERSHIP (Start with present or most recent church. Use more paper as needed)

Church Name:		Address:	
Began Attending:	Until:	Member:	Attender:
Ministry Involvement:			

Church Name:		Address:	
Began Attending:	Until:	Began Attending:	Until:
Ministry Involvement:			
Reason(s) for Leaving:			

Church Name:		Address:	
Began Attending:	Until:	Began Attending:	Until:
Ministry Involvement:			
Reason(s) for Leaving:			

Initial one:	<i>I have read The Baptist Faith and Message and agree to abstain from teaching or promoting anything that contradicts the doctrinal statements found there in while employed by the SBA.</i>
Yes: No:	

Name:		Date:	
VI. CHARACTER REFERENCES (Provide three)			
Name:		Relationship:	
Occupation:		Years Known:	
Address:			
E-mail:		Primary Phone:	
Name:		Relationship:	
Occupation:		Years Known:	
Address:			
E-mail:		Primary Phone:	
Name:		Relationship:	
Occupation:		Years Known:	
Address:			
E-mail:		Primary Phone:	
VII. ADDITIONAL INFORMATION			
<i>SBA Ministry Center Hours: Monday, Wednesday, Thursday (8:30 am - 4:30 pm) Tuesday (8:30 am - 8:30 pm); Friday (8:30 am -12:30 pm)</i>			
Days and hours available:			
Can you work 10-15 hours a week?		Yes:	No:
Have you ever been charged with or convicted of a crime?		Yes:	No:
Have you ever been charged with or convicted of abusing or molesting a minor?		Yes:	No:
Have you ever been bonded?		Yes:	No:
<i>I hereby authorize Shelby Baptist Association to:</i>			
<ul style="list-style-type: none"> • Do a reference check for employment purposes and any necessary background and verification pertaining thereto. • Do a criminal records check for employment purposes and any necessary background and verification pertaining thereto. • Do a credit check for employment purposes and any necessary background and verification pertaining thereto. 			
Social Security Number:		Date of Birth:	
Signature:		Date:	

---Office Use Only---	Date Received	Staff Member			
Completed Application			Date & Time of Interview:		
Letter of Reference			Location of Interview:		
Applicant Contacted			Approved:	Denied:	Contacted: