



# THE CLINTON CHRISTIAN CHURCH (DISCIPLES OF CHRIST)

Employment Application Administrative Assistant



APPLICANT INFORMATION			
Last Name		First	M.I.      DOB
Street Address			Apartment/Unit #
City		State	ZIP
Phone		E-mail Address	
Date Available	Social Security #. (optional)		Desired Salary
Who referred you to us?			
Are you a citizen of the United States?    YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever been convicted of a felony?    YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			
Have you had previous experience as a administrative assistant or secretary?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
What skills do you have as an administrative assistant (please explain)?			
In case of illness or accident, please notify: Name _____ Phone: _____			
EDUCATION			
High School		Address	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
REFERENCES			
<i>Please list three professional references not related to you that you have known for at least 3 years.</i>			
Full Name		Years & How Known	
Company		Phone (      )	
Address			
Full Name		Years & How Known	
Company		Phone (      )	
Address			
Full Name		Years & How Known	
Company		Phone (      )	
Address			

PREVIOUS EMPLOYMENT			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? If no please explain.		YES <input type="checkbox"/>	NO <input type="checkbox"/>

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

Please list computer skills and program experience below (please list all)

**By signing and submitting this application:**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I give the employer the right to contact and obtain information from all reference, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

NOTE: The position of Administrative Assistant reports to the Minister, is a part time position (25 hours/week) with sick and vacation leave, health insurance is not provided.

Signature

Date

FOR OFFICE USE ONLY:

Application Received Date: \_\_\_\_\_ Application Received by: \_\_\_\_\_