## APPLICATION FOR EMPLOYMENT HOPE EVANGELICAL LUTHERAN CHURCH OF SEATTLE, WASHINGTON (HOPE)

Because we are a church body, The Lutheran Church—Missouri Synod retains the right to give preference in hiring to persons who are members in good standing of an LCMS congregation.

## PERSONAL DATA

(First)	(Middle)		Date:			
City		State	Zip Co	ode		
City		State	Zip Code			
Alternate Phone		Best Contact Time	email Address			
e						
		Referred by:				
Des	ired Pay Range					
Relationship	Phone	Name of Nearest Rel	ative Phone			
Name,	location and pastor of	congregation				
a position at Hope?						
	ve continuous years,	listing the <b>most rec</b>	ent first. List military service	e, if applicable, as part		
Are you currently working	g for this employer	☐ Yes ☐ No	If yes, may we contact?	☐ Yes ☐ No		
	City State					
	Brief Description of Duties:					
	Title Phone Number					
	Full-time □ Part-	time 🗆				
	City State					
-		of Duties:				
			hone Number			
	1					
	City State					
	Brief Description	of Duties:				
	Title	Pl	hone Number			
	Full-time □ Part-	time 🗆				
	Gt. G.					
	City State					
	City State  Brief Description	of Duties:				
	Brief Description of Title		hone Number			
	City City  Alternate Phone Typ  Des  Relationship  Name, a position at Hope?	City  Alternate Phone  Type of Work Desired Full-time Part-tim Desired Pay Range  Relationship Phone  Name, location and pastor of a position at Hope?  ORY  by you during the past five continuous years,  Are you currently working for this employer  City State Brief Description Title Full-time Part-  City State Brief Description Title Full-time Part-  City State Brief Description Title Full-time Part-  City State Brief Description Title Full-time Part-	City State    City   State	City State Zip Co City State Zip Co Alternate Phone Best Contact Time email Address    State		

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## CRIMINAL HISTORY

CKIMINAL IIISTOKI						
Have you ever been <u>convicted</u> of a criminal	offense? □ Yes □ No					
Are you currently on probation or on parole?	? □ Yes □ No					
If you answered "Yes" to any of the above q occurred.	uestions, please explain the nature	of the offense and prov	vide the date of the	offense and the	county and state in which it	
LCMS INFORMATION						
Have you been employed by the LC	•	No If yes, when	:			
Location:	<del></del>					
PERSONAL REFERENCES						
List three references who we may contact	:					
Name	Phone	Business/Profes	ssion	Lei	Length of acquaintance	
1.						
2.						
J.						
EDUCATION						
		Years	Graduation	Diploma/	Major/	
School Name/Address High School		Attended	Date	Degree	Subjects of Study	
City/State						
College/University						
City/State Business/Trade School						
City/State						
OTHER						
1. Are you a citizen of the United	· ·				☐ Yes ☐ No	
2. Have you ever been discharged				• •	-	
3. Hope does not participate in the with Hope terminates is not eligible.				ingiy, a staii i	nember whose employme	
4. I understand that employment i		•		yself or the en	mployer at any time, and	
for any legal reason. Initial her						
APPLICANT STATEMENT						
I certify that this employment applie	cation was completed by me	e and that all of the	e information o	n this applica	tion is true and complete to	
the best of my knowledge. I unders		_			-	
disqualification from further consid				_	e to contact any individua	
or organization listed in this applica	tion. I understand that this a	application is not v	alid without m	y signature.		
Print Name	_					
Signature		Date				
Please submi	t a resume with your appl	lication. Thank y	ou for your in	terest in Ho	pe.	

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