

# Metuchen Christian Academy DaySpring Child Care Center

130 Whitman Ave., Metuchen, NJ 08840 Rev. Gregory D. McFarren, Lead Pastor Church Office: 732-549-4163 ● Fax: 732-549-6686

### **APPLICATION FOR EMPLOYMENT**

#### I. PERSONAL BACKGROUND INFORMATION:

Full Name:		Date of Birth:		Date of Application:	
Home #: Cell #:		E-Mail:			
Social Security Number:	//	Do you have	a Green Card	d? Yes □ N	lo 🗆
Driver's License:		5	State:		
Address:		City:		_ State:	Zip:
How long have you lived at the	above address:				
If less than 5 years, please prov	ide former addr	ess:			
How long at this address:					
Marital Status (Circle one): Sin	gle Engaged	d Married	Widowed	Divorced	Remarried
Spouses Name:		Spouses O	ccupation:		
	(I	f applicable)			
Years married How doe	s your spouse f	eel about you v	vorking?		
Do you have your own transport	ation? Yes	No □			
Do you have childcare for your	child/children if/v	when they are r	not in school?	Yes □ No	
Do you have any medical or ph	ysical condition	s that would p	revent you fro	m performing	g certain types of
activities stated in the Job Desc	ription? Yes □	No   If YES	, please expl	ain.	
Do you have Health Insurance (	Coverage throug	gh your spouse	? Yes □ No		
If yes, please list the insurance	policy name/pol	icy number:			

Name of Spouses Employer:		
II. EDUCATIONAL BACKGROUND:		
Circle the highest grade completed: 6 7 8 9	9 10 11 12	
High School:	Thru Grade	Years completed:
College:	Years completed	Date Graduated:
Major:	Post Graduate:	
Other Education:		
III. WORK EXPERIENCE:		
(Circle	areas of experience)	
Managerial Financial Secretarial/Clerical	Typing (WPM)	Verbal/Written Communication
Word Processing Microsoft Office (Word	_ Excel Outlook	PowerPoint) Filing
Janitorial Customer Service Other:		
Please circle the appropriate statements cond	cerning Computer Skills:	
I have No Knowledge Little Knowledge	ge Much Knowledge	
Do you have any formal Computer Training?	Yes □ No □	
Where:		
What:		
Have you ever been fired from a position? Ye	s □ No □ <b>If Yes, wh</b> y	
Do you work well with other people of differen	nt multiracial, multiethnio	c or denominational beliefs other
than your own?		
If hired, date you can begin training?		

## IV. JOB EXPERIENCE: (Please begin with the most recent)

Name of Company:	Date of Employment:	to
Position Held:		
Reason for leaving:		
Employers Name:		
Address:		
May we contact this employer for a work reference? Yes ☐		
Name of Company:		
Position Held:		
Reason for leaving:		
Employers Name:		
Address:		
May we contact this employer for a work reference? Yes ☐	No 🗆	
Name of Company:		
Position Held:		
Reason for leaving:		
Employers Name:	Phone #:	
Address:		
May we contact this employer for a work reference? Yes □		

#### **CHARACTER REFERENCE SHEET**

Do you have a current driver's license? Yes $\square$ No $\square$				
Has your driver's license ever been suspended or revoked? Yes $\square$ No $\square$				
Do you smoke cigarettes? Yes $\square$ No $\square$				
Do you drink alcoholic beverages? Yes □ No □				
Have you ever been arrested or convicted for the use or sale of drugs? Yes $\Box$ No $\Box$				
Have you Have you ever been arrested or convicted of child neglect or child abuse? Yes $\Box$ No $\Box$				
Have you ever been convicted or sued for any type of child abuse? Yes $\Box$ No $\Box$				
If YES, please provide the following information for each. Date: Date:				
County and State of conviction or filing of lawsuit:				
Have you ever been arrested for or convicted of any related offense? Yes $\square$ No $\square$				
If YES, please explain				
Have you ever been arrested for or convicted of any misdemeanor or felony? Yes □ No □  If YES, please explain				
Other than the above matters, is there any fact of circumstance involving you or your background that would call into question your employment with us? Yes   No   If YES, please explain				
V. PERSONAL REFERENCES: (Other than a relative)				
Name: Phone #:				
Address: City: State: Zip:				
Years Acquainted: Relationship:				

Name:	Phone #:			
Address:		City:	State:	Zip:
Years Acquainted:				
VI. CHRISTIAN EXPERIEN				
Do you have a personal relation	nship with Jesus Ch	rist? Yes □ No □		
How long have you been a Ch	ristian? Date of Cor	nversion:		
In your own handwriting, briefly salvation experience:		•	•	•
Please complete this quote: Jo				
CHURCH AFFLIATION:				
Do you attend church regularly	⁄? Yes □ No □ <b>If</b>	YES, where		
Denomination/Affiliation:				
Pastor's Name:		Church #:		
Address:				
CHURCH PARTCIPATION: P				
	Regularly	Intermittently	Rarely	
Sunday School				_
Sunday Morning Worship				_
Midweek Service				_
Other:				

Have you personally participated in the leadership of a ministry such as (e.g. Sunday School Teacher, Children's Church, Youth, etc.) Please list:
Describe area of responsibility:
MATTERS OF FAITH:
Do you believe the Bible to be the inerrant, inspired, and infallible Word of God, final authority in all matters of faith, conduct, and living? Yes $\Box$ No $\Box$
Please carefully read our 16 Tenets of Faith (attached) and indicate the following:
I fully support these Tenets of Faith as written without reservation.
Signature: Date:
Item # Item # The exceptions represent either disagreements or items for
which I have not yet formed an opinion or conviction.
Signature: Date:
Are you willing to abide by the guidelines concerning your social conduct, habits, and activities that are
consistent with those set forth by the Word of God? Yes $\square$ No $\square$
Signature: Date:
What are your spiritual strengths?
What are your spiritual weaknesses?

#### **APPLICANT'S STATEMENT**

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give to you any information they have regarding my character and I release all such references from liability for any damage that may result from furnishing such evaluation to you.

Should my application be accepted, I agree to be bound by the terms of employment and to refrain from

unscriptural conduct in the performance of my services on behalf of the church. In signing this application, I not only affirm that the information that I have given here is true and correct, but if hired I am willing to undergo a criminal background check prior to the starting date of my employment. Applicant's Signature Date NOTE: If hired, there will be a 90-day probation agreement. Upon which, a review of your job performance will be made. In the event, you are unable to perform the required tasks as training to the satisfaction of your employer, your employment may be terminated. Do you agree to this condition? Yes □ No □ If yes, please sign here: \_\_\_\_\_\_ Date: \_\_\_\_\_ **For Office Use Only** 

ATTACH A CURRENT COPY OF DRIVER'S LICENSE

Days

\_\_\_\_\_ Time \_\_\_\_\_ to \_\_\_\_ Pay Rate: \_\_\_\_\_