

GRACE PRESBYTERIAN CHILD CARE

Date: _____

Name: _____
 First Middle Last Date of Birth

Present Address: _____
 Street City State Zip Code Apt. #

Phone #: _____ Driver's License # _____ State _____ Exp. Date ___/___/___

Social Security #: _____ Would you be willing to drive the bus? Yes or No
 Do you have an "F" Endorsement? Yes or No

Are you prevented from lawfully being employed in this country because of Visa or Immigration status? Yes or No
 Are you 18 years or older? Yes or No

Position Applied for: _____
 Next of kin or other person to reach in an emergency:

Name	Relationship	Address	Phone #

Educational Background: (List Diplomas, Degrees, and Certifications; List all training programs attended: workshops, conferences, and courses)			
Title	School/Institution	City & State	Date

JOB / EMPLOYMENT HISTORY				
Date, Month, and Year	Name, Address, and Phone Number of Employer	Salary	Position	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				

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PERSONAL REFERENCES (List three persons not related to you, whom you have known at least one year)			
Name	Address and Phone Number	Place of Business	Years Acquainted

GENERAL STATEMENTS AND AUTHORIZATIONS

- Do you use, or have you ever used, illegal drugs? ___ Yes ___ No
- Have you ever been convicted of a criminal offense? ___ Yes ___ No
- Have you ever been charged with child neglect or abuse? ___ Yes ___ No
- Has your driver's license ever been revoked or suspended? ___ Yes ___ No
- Other than the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision guidance, and care of young people? ___ Yes ___ No

(Please explain any affirmative answers to the above questions on the bottom of the last page. You may also explain or elaborate upon, any item(s) on the application there.)

TCA 14-10-129 states that "each person applying to work with children as a volunteer or as a paid employee... shall complete an application on a form prescribed or approved by the Department of Human Services... It shall be unlawful for any person to falsify any information required on the application. Knowingly failing to disclose required information shall be deemed to be falsification to the same extent as providing false information."

By signing this form, I am affirming that the above statements I have made are true and factual to the best of my knowledge; and I am granting permission for all persons, organizations, or agencies listed above to be contacted for the expressed purpose of pre-employment screening.

Date

Applicant's Signature

GRACE PRESBYTERIAN CHILD CARE

I understand that:

- A. In signing this application, I have read the attached information and apply for employment with Grace Presbyterian Church. I affirm that the information I have given on this form is true and correct.
- B. An offer of employment is contingent on the applicant agreeing to adhere to all policies and procedures of Grace Presbyterian Church.
- C. The accompanying release must be signed and witnessed for this application to be considered.
- D. I certify that (a) no civil, criminal, or ecclesiastical complaint has ever been sustained or is pending against me for sexual misconduct; (b) I have never resigned or been terminated from a position for reasons related to sexual misconduct.

Applicant's Signature

Date

Note: if you are unable to make the above certification, you may instead give in the space below a description of the complaint, termination, or the outcome of the situation and any explanatory comments you care to add.

This certification is required by the Memphis Presbytery of the Presbyterian Church (USA)

FOR APPLICANT'S USE:

