



New Vineyard Church
Community Development Center
4207 Rainey Road, Jackson, MS 39212
Office: (601) 487-2330
Email: newvineyardms@gmail.com

APPLICATION FOR EMPLOYMENT

Last Name _____ First Name _____ Middle Name _____

Street Address _____ City _____ State _____ Zip _____

Mailing Address _____ City _____ State _____ Zip _____

Birthdate _____ SSN _____

Telephone # (____) _____ Cellular Phone # (____) _____

E-mail Address _____

Date of Application _____

Name of person who referred you _____

Are you legally eligible to work in the United States? Yes or No

Do you possess a valid driver's license? Yes or No

Are you at least 18 years of age? Yes or No

Do you have a valid Immunization Form 121? Yes or No

EMPLOYMENT DESIRED

Position Desired:

- | | | |
|---|---|--|
| <input type="checkbox"/> Camp Counselor | <input type="checkbox"/> Custodian | <input type="checkbox"/> Food Service Worker |
| <input type="checkbox"/> Camp Coordinator | <input type="checkbox"/> Tutor | |
| <input type="checkbox"/> Assistant Camp Coordinator | <input type="checkbox"/> Office Assistant | |

Which age group do you prefer to work with?

- | | | |
|------------------------------|-------------------------------|--------------------------------|
| <input type="checkbox"/> Any | <input type="checkbox"/> 7-8 | <input type="checkbox"/> 13-14 |
| <input type="checkbox"/> 5-6 | <input type="checkbox"/> 9-12 | <input type="checkbox"/> 15-16 |

EMPLOYMENT RECORD

List all previous employers, starting with your most recent employer. Attach additional pages if necessary. Include self-employment, summer and part-time jobs. You may also include any verifiable volunteer work. Please be as accurate as possible since we contact past employers for reference purposes. You may include your resume with this application; however, please also complete this Employment Record section.

Company Name: Address:	Supervisor's Name Phone #	Dates Employed From: To:
Job Position(s)	Final Pay	Duties & Job Responsibilities
What did you like most about your position?	What did you like least about your position?	Reason for Leaving?

Company Name: Address:	Supervisor's Name Phone #	Dates Employed From: To:
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If currently employed, why do you desire to change your position? _____

Are you employed now? Yes or No May we contact your current employer? Yes or No

Is there any other job-related information you want us to know about you? _____

AREAS OF EXPERTISE & INTEREST

EDUCATION

	School Name	City/State	Major Course/ Subject	Circle Last Year Completed	Degree
High School/ Prep				9 10 11 12	
College				1 2 3 4	
Graduate Work				1 2 3 4	
Other				1 2 3 4	

REFERENCES

List at least three character references that know you well and can attest to your abilities and suitability for NVCDC employment (*one reference MUST be a family member*).

Name	Address	Occupation/ Relationship to You	Telephone Number	# of Years Known

Important Note:

If hired, you will be required to pass all FBI fingerprint and child abuse central registry, and sex offender checks.

Signature of Applicant _____ Date _____