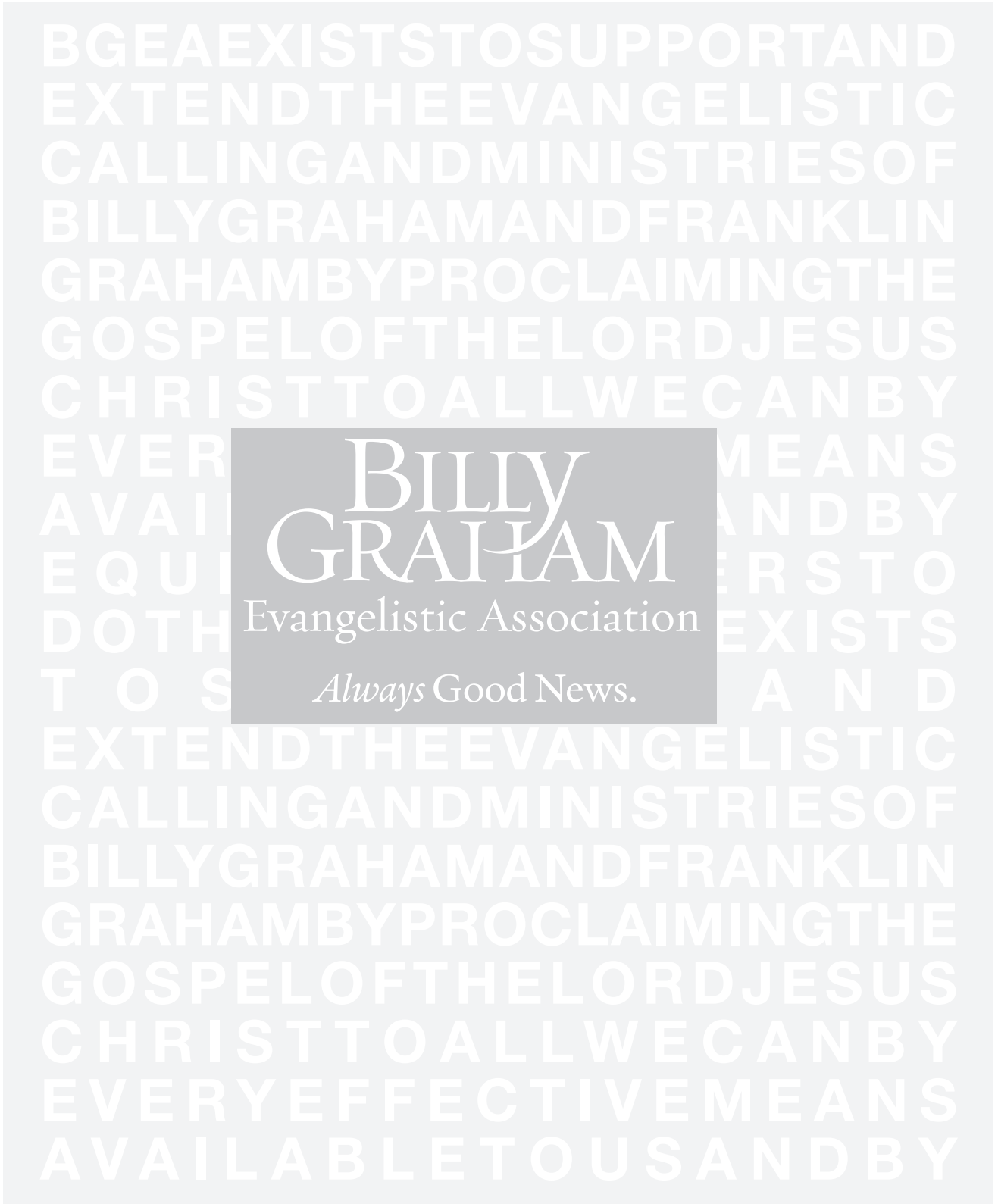


APPLICATION FOR EMPLOYMENT

DATE OF APPLICATION:

NAME:

POSITION(S) APPLYING FOR:



APPLICATION FOR EMPLOYMENT



1 Billy Graham Parkway | Charlotte, NC 28201 | 704-401-2432 | billygraham.org

Federal and state laws make it unfair employment practice for a religious corporation to require or request an applicant to furnish information that pertains to age, race, color, creed, national origin, sex, marital status, veteran status, status with regard to public assistance, disability, membership or activity in a local commission, or religion except when based on a bona fide occupational qualification.

ALL QUESTIONS MUST BE ANSWERED **CAREFULLY** AND **COMPLETELY** WITH OR WITHOUT A RESUME. PLEASE TYPE OR PRINT IN INK.

NAME	FIRST	MIDDLE	LAST	<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME
				<input type="checkbox"/> ASSOCIATE <input type="checkbox"/> PROJECT
ADDRESS	STREET	CITY	STATE	ZIP
HOME TELEPHONE NUMBER	CELL PHONE NUMBER (OPTIONAL)		E-MAIL ADDRESS (OPTIONAL)	
				DATE AVAILABLE TO BEGIN WORK
				SALARY EXPECTED

EDUCATION			GRADUATE		DEGREE/MAJOR	
SCHOOLS ATTENDED			YES	NO	FIELD OF STUDY, CERTIFICATION	
HIGH SCHOOL	CITY	STATE			X	X
VOCATIONAL TECH TRAINING	CITY	STATE				
COLLEGE OR UNIVERSITY	CITY	STATE				

ARE YOU 18 YEARS OF AGE OR OLDER?
 YES NO

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES?
 YES NO

OTHER EDUCATION OR TRAINING

WHAT OFFICE/SPECIALIZED BUSINESS EQUIPMENT CAN YOU OPERATE?

WHAT SPECIAL TECHNICAL, COMPUTER, OR LANGUAGE SKILLS DO YOU HAVE?

NAMES AND ADDRESSES OF PREVIOUS EMPLOYERS (Start With Present Employer—Do Not Write “See Résumé”)

EMPLOYER	Dates Employed			Specific Work Performed
	From	To		
1 STREET ADDRESS	Mo. Yr.	Mo. Yr.		
CITY/STATE/ZIP CODE				
TELEPHONE #	Supervisor			
	Hourly Rate/Salary			
JOB TITLE	Starting	Final		
JOB STATUS				
	<input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> TEMP			
REASON FOR LEAVING				
			May we contact for a reference?	<input type="checkbox"/> Yes <input type="checkbox"/> No
EMPLOYER	Dates Employed			Specific Work Performed
	From	To		
2 STREET ADDRESS	Mo. Yr.	Mo. Yr.		
CITY/STATE/ZIP CODE				
TELEPHONE #	Supervisor			
	Hourly Rate/Salary			
JOB TITLE	Starting	Final		
JOB STATUS				
	<input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> TEMP			
REASON FOR LEAVING				
			May we contact for a reference?	<input type="checkbox"/> Yes <input type="checkbox"/> No
EMPLOYER	Dates Employed			Specific Work Performed
	From	To		
3 STREET ADDRESS	Mo. Yr.	Mo. Yr.		
CITY/STATE/ZIP CODE				
TELEPHONE #	Supervisor			
	Hourly Rate/Salary			
JOB TITLE	Starting	Final		
JOB STATUS				
	<input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> TEMP			
REASON FOR LEAVING				
			May we contact for a reference?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you need additional space, please continue on a separate sheet of paper.

BASIC STATEMENT OF YOUR PERSONAL CHRISTIAN TESTIMONY

(including an explanation of the basis of your salvation and what Jesus Christ means to you in your daily life)

I HEREBY AUTHORIZE ALL MY PREVIOUS EMPLOYERS, OR REFERENCES, TO FURNISH ANY INFORMATION CONCERNING MY PERSONAL CHARACTER, HABITS, OR EMPLOYMENT RECORDS. I HEREBY RELEASE ALL SUCH PERSONS FROM ANY AND ALL LIABILITY OR DAMAGES INCURRED AS A RESULT OF INQUIRY AND FURNISHING THIS INFORMATION.

I HEREBY CERTIFY THAT THE ANSWERS GIVEN AND STATEMENTS MADE ARE TRUE AND CORRECT. I UNDERSTAND THAT ANY OMISSION OF FACT OR FALSE OR MISLEADING INFORMATION GIVEN IN THIS APPLICATION FOR EMPLOYMENT, ANY ATTACHMENTS TO IT, OR IN MY INTERVIEW(S) MAY RESULT IN THE DENIAL OF MY EMPLOYMENT, THE WITHDRAWAL OF MY CONDITIONAL OFFER OF EMPLOYMENT, IF MADE, OR DISCIPLINARY ACTION, UP TO AND INCLUDING IMMEDIATE DISCHARGE, AS APPLICABLE. OFFERS OF EMPLOYMENT BY BGEA ARE BASED ON MANY FACTORS INCLUDING, BUT NOT LIMITED TO, ACTUAL JOB AVAILABILITY, COMPATIBILITY OF APPLICANT/CANDIDATE QUALIFICATIONS WITH JOB REQUIREMENTS, INTERVIEW PERFORMANCE, TEST RESULTS (WHEN APPLICABLE), AND SATISFACTORY EMPLOYMENT HISTORY AND REFERENCES, AND ARE MADE AT THE SOLE DISCRETION OF BGEA.

IF HIRED, I UNDERSTAND THAT EMPLOYMENT IS "AT WILL," WHICH MEANS THAT EITHER I OR THE COMPANY CAN TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, WITH OR WITHOUT PRIOR NOTICE, AND FOR ANY REASON NOT PROHIBITED BY LAW. ALL EMPLOYMENT IS CONTINUED ON THAT BASIS. I UNDERSTAND THAT NO SUPERVISOR, MANAGER, OR EXECUTIVE OF THE COMPANY, OTHER THAN THE PRESIDENT, HAS ANY AUTHORITY TO ALTER THE FOREGOING. I UNDERSTAND THAT NOTHING IN THIS APPLICATION OR IN THE INTERVIEW PROCESS IS INTENDED TO CREATE AN EMPLOYMENT CONTRACT. I ALSO UNDERSTAND THAT EMPLOYMENT MAY BE DEPENDENT UPON PASSING A REQUIRED PHYSICAL EXAMINATION.

BY SIGNING THIS APPLICATION, I AGREE THAT THIS INFORMATION CAN BE SHARED WITH SAMARITAN'S PURSE IN BOONE, N.C. *(If not, please strike this line and initial before signing.)*

SIGNATURE _____ DATE _____

DO NOT WRITE BELOW THIS LINE.

START DATE/TIME _____ AS _____ (JOB TITLE) _____ RATE _____ PER _____

DEPT. _____ SUPERVISOR _____ INTRODUCTORY PERIOD ENDS _____ (DATE)

EMPLOYEE NUMBER _____ ORIENTATION DATE/TIME _____ A.M./P.M.

JOB CODE _____ JOB GRADE _____ FULL TIME/PART TIME/PROJECT/ASSOCIATE EXEMPT/NONEXEMPT

AUTHORIZED _____ (SIGNATURE) _____ (DATE)