



IMMANUEL LUTHERAN CHURCH AND SCHOOL
BATAVIA, ILLINOIS

Employment Application

Name _____ Applying for _____

Address _____

Email address _____

Daytime contact number _____ Evening contact number _____

Church membership _____ City _____

☐ Less than one year ☐ 1-5 years ☐ More than 5 years ☐ No church membership

If current church membership is fewer than five years, please list former church _____

Please indicate your availability

_____ Monday	a.m.	p.m.	_____ Friday	a.m.	p.m.
_____ Tuesday	a.m.	p.m.	_____ Saturday	a.m.	p.m.
_____ Wednesday	a.m.	p.m.	_____ Sunday	a.m.	a.m.
_____ Thursday	a.m.	p.m.			

Education & Credentials

Level Attained

High School: _____

College: _____

Red Cross Certification in ? CPR First Aid AED

Other education, training, or computer experience specifically related to this position

Work Experience *Indicate which place of work may be contacted to verify work history and/or as a reference.*

Place of Business	Dates	Contact? Yes/No
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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What are your professional goals and/or reason(s) for seeking this job?

What do you feel that you can uniquely contribute to Immanuel Lutheran Church & School?

Additional information that might be helpful

Have you ever been convicted of or pled guilty to a crime, either a misdemeanor or a felony? (other than minor traffic violations)

☐ No ☐ Yes

If yes, please explain fully

References

Please list three personal references (people who are not related to you by blood or marriage and are not employees of Immanuel Lutheran Church & School) and provide a complete address and telephone information for each. References are confidential.

- 1 Name _____
Address _____
Daytime contact number _____ Evening contact number _____
Relationship to reference _____
- 2 Name _____
Address _____
Daytime contact number _____ Evening contact number _____
Relationship to reference _____
- 3 Name _____
Address _____
Daytime contact number _____ Evening contact number _____
Relationship to reference _____

Please Read Carefully...

The information contained in this application is correct and to the best of my knowledge. I understand that any false or misleading information or omission on this application or on any resume or other document I have submitted to you, or made by me in any interview(s) I may have with you, may preclude an offer of employment or may result in a withdrawal of an employment offer, or may result in my discharge from employment if I am already employed at the time the false or misleading information or omission is discovered.

I authorize references listed in this application to give you any information they may have regarding my character and ability to perform the applied for job. In consideration of the receipt of this application by Immanuel Lutheran Church & School, I hereby release any individual church, school, youth organization, charity, employer, references or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature at any time to me, my heirs, or family on account of compliance or any attempts to comply with this authorization, excepting only the communication of knowingly false information.

Should my application be accepted, I agree to be bound by the bylaws and policies of Immanuel Lutheran Church & School and to refrain from unscriptural conduct in the performance of my services on behalf of the ministry. I agree that my employment may be terminated, with or without cause, and with or without notice, at any time by either Immanuel Lutheran Church & School or me. I also understand that any handbooks and policies that may be provided to me during the course of my employment shall not be construed as a contract.

Further, I understand that any offer of employment is contingent upon successful completion of a required criminal background check.

I agree that I have read and understand the above acknowledgments and agreements and recognize all the above as conditions of employment.

Applicant Signature _____ Date _____

Signature of Parent or Guardian _____ Date _____
(If applicant is under 18 years of age)

Applicants under 18 years of age must provide a valid work permit.



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BATAVIA, ILLINOIS

Background Check Authorization

Print Name _____
First Middle Last

Former Name(s)/Dates Used _____ / _____
_____ / _____

Current Address/since _____ / _____

Previous Address/from _____ / _____

Previous Address/from _____ / _____

Social Security Number _____ Date of Birth _____

Telephone Number _____

Drivers License Number/State _____ / _____

The information contained in this application is correct to the best of my knowledge. I hereby authorize Immanuel Lutheran Church & School and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: verification of social security number, current and previous residences, employment history, education background, character references, drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state or county jurisdictions, driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to Immanuel Lutheran Church & School or its agents. I further authorize the complete release of any records or data pertaining to me that the individual, company, firm, corporation or public agency may have, to include information or data received from other sources.

I hereby release Immanuel Lutheran Church and School, the Social Security Administration, and its agents, officials, representatives or assigned agencies, including officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family or associates because of compliance with this authorization and request to release.

Signature _____ Date _____



Reference Form Letter

New employees of Immanuel Lutheran Church & School are required to submit three references. Please answer the following questions to the best of your knowledge and sign your name, along with the date and your full mailing address. Your cooperation will be most helpful. Thank you.

Reference for _____

How long have you known this individual?

What has been the nature of your relationship? *i.e., neighbors, friends, business associates, fellow church members, etc.)*

What information can you offer concerning this individual's reputability?

Do you see this individual as being a responsible individual? *Please state specific reasons for your response)*

Do you feel that he or she would have a sincere and genuine interest in the well-being of all children served by the preschool and grade school? Why?

Please share any additional information that may be of relevance in this matter.

Individual completing this reference form

Signature _____ Date _____

Print your full name and mailing address

Please return completed reference to:

Mrs. Lori St.Vincent, Immanuel Lutheran Church & School,
950 Hart Road, Batavia IL 60510