**PERSONAL INFORMATION**

*Please complete the following:*

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** |  | | | | | | | | |
|  | Last | | First | | | Middle/Maiden | | | |
| **Street**  **Address** |  | | | | | | | | |
|  | Street | | | City | | State | | Zip Code | |
|  |  | | | | | | | | |
| **Phone** |  | |  | | |  | | | |
|  | Home | | Mobile | | | Other | | | |
| **Email** |  | | | |  | | | | |
|  | Primary | | | | Secondary | | | | |
| **Social Security Number** | |  | | | **Date of Birth** | | / / | | |
| **Driver License Number** | |  | | | **Driver License State** | | | |  |

|  |  |  |
| --- | --- | --- |
| *List all counties and states of residence for the past seven (7) years* | | |
|  |  |  |
|  |  |  |

**EMPLOYMENT HISTORY**

*Please list your employment history relevant for this position. If you are self-employed, you are your current employer. Please note, your current employer will not be contacted without your permission.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employer | | | Title/Duties | Dates Employed |
|  | | | | |
|  | Supervisor | |  | Reason for Leaving |
|  | |  | | |
| Employer | | | Title/Duties | Dates Employed |
|  | | | | |
|  | Supervisor | |  | Reason for Leaving |
|  | |  | | |
| Employer | | | Title/Duties | Dates Employed |
|  | | | | |
|  | Supervisor | |  | Reason for Leaving |
|  | |  | | |
|  | |  | | |

**ADDITIONAL EXPERIENCE**

*Please describe any additional experiences including volunteer efforts relevant to this position.*

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**EDUCATION/CERTIFICATION**

*Please describe any education or training programs completed relevant to this position.*

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**DISCLAIMERS**

*Please answer the following disclaimers and provide additional information, as applicable.*

|  |  |  |
| --- | --- | --- |
| **Yes** | **No** | **Have you ever been convicted of a criminal offense (felony or misdemeanor, except for minor traffic violations), entered into a plea agreement, including any deferred sentence or judgment arrangement in connection with a criminal charge?** *If you answer “yes” please attach a statement explaining the nature and date of the offense, court where the conviction was entered, and any other relevant information.* |
| **Yes** | **No** | **Have you ever been charged with a sexual offense, offense related to children, or crime of violence?** *If you answer “yes” please attach a statement explaining the nature and date of the offense charged, law enforcement agency making the charge, and any other relevant information.* |

|  |  |  |
| --- | --- | --- |
| **Yes** | **No** | **Have you ever been reported to a social service agency, law enforcement authority, child abuse registry, or similar organization regarding abuse or misconduct involving children?** *If you answer “yes” please attach a statement explaining the circumstances and provide the name and address of the entity receiving the report.* |

**REFERENCES**

*Please provide the names and contact information for three references who can speak to your abilities related to this position. References should be older than 21 years of age and should not be relatives.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Ref. 1** |  | | | | |
|  | Name | | Relationship |  | Years Known |
|  |  | | | | |
|  | Mailing Address | | City | State | Zip Code |
|  |  |  | |  | |
|  | Phone | | Email |  |  |
| **Ref. 2** |  | | | | |
|  | Name | | Relationship |  | Years Known |
|  |  | | | | |
|  | Mailing Address | | City | State | Zip Code |
|  |  |  | |  | |
|  | Phone | | Email |  |  |
| **Ref. 3** |  | | | | |
|  | Name | | Relationship |  | Years Known |
|  |  | | | | |
|  | Mailing Address | | City | State | Zip Code |
|  |  |  | |  | |
|  | Phone | | Email |  |  |

**ASSURANCE AND RELEASE**

*To the best of my knowledge, I assure that the information provided in this application is complete and accurate. I understand providing false information or the failure to make required disclosures is grounds for immediate dismal and reporting to authorities as applicable.*

*I authorize the Unitarian Universalist Church of Jackson to request and receive from any person or organization to provide any information concerning my previous employment, education, credit history, driving record, criminal conviction record, sexual offender registry or other qualifications for my employment.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Signature** |  | | **Date** | / / |
| *If applicant is a minor:*  **Parent/Guardian Signature** | |  | | |