



Employment Application

The Arizona Conference of Seventh-day Adventists (AZC) is an equal opportunity employer which does not discriminate in employment policies and practices on the basis of race, national origin, gender color, age, disability, or any other basis prohibited by law. The employment practices of the church reflect religious preferences in harmony with the United States Constitution and controlling law, and it, therefore, hires only Seventh-day Adventist Church members in good standing.

(Please TYPE or PRINT – Complete all sections)

| | | |
|---|------------------|----------------------------------|
| Name (Last, First, Middle Initial as stated on the SS Card) | Other names used | E-Mail Address |
| Address | City | State Zip Code |
| Home Phone | Cell Phone | Work Phone |
| Position(s) applied for: _____ | | Department (If Applicable) _____ |
| Are you seeking/Available for: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary Date Available _____ | | |
| Are you able to perform the duties of the position? <input type="checkbox"/> Yes <input type="checkbox"/> No (Reasonable accommodation will be provided) | | |
| Do you have the legal right to work in the US? <input type="checkbox"/> Yes <input type="checkbox"/> No (Proof of work authorization required for employment) | | |
| Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Have you been previously employed by the AZC? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Have you been previously employed by another Adventist entity? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, where? _____ | | |
| Do you have any relatives employed by the AZC? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, where? _____ | | |
| Have you ever been convicted of a felony or misdemeanor, other than a minor traffic offense? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| If yes, please explain: _____ | | |

(Affirmative answers to the questions regarding convictions will not be an automatic bar to employment.)

Are you a baptized member of the Seventh-day Adventist Church? Yes No

Where is your membership? _____

Do you hold any denominational license/credential? Yes No If Yes, what? _____

| | Name of Educational Institution | School Location | Did You Graduate? | If No, # of Years Completed | List Degree and Major |
|--------------------------|---------------------------------|-----------------|---|-----------------------------|-----------------------|
| High School | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Trade or Business School | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| College/University | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

| | | | | | |
|-----------------|--|--|------------------------------|--|--|
| Graduate Work | | | <input type="checkbox"/> Yes | | |
| | | | <input type="checkbox"/> No | | |
| Other Education | | | <input type="checkbox"/> Yes | | |
| | | | <input type="checkbox"/> No | | |

Other Skills: If applicable for the position, in which of the following do you have skill/knowledge?

- | | |
|--|--|
| <input type="checkbox"/> Typing — Words per Minute _____ | <input type="checkbox"/> MS Outlook |
| <input type="checkbox"/> 10-Key | <input type="checkbox"/> FileMaker Pro |
| <input type="checkbox"/> MS Word | <input type="checkbox"/> Adobe InDesign |
| <input type="checkbox"/> MS Excel | <input type="checkbox"/> Adobe Photoshop |
| <input type="checkbox"/> MS PowerPoint | <input type="checkbox"/> Adobe Acrobat Pro |
| <input type="checkbox"/> Other Software/Skills _____ | |

Please list all employment for the past 10 years, beginning with the most recent. Attach additional sheet if needed.

| | |
|---|---|
| Employer Name: | Job Title: Yrs/Mths Full-Time _____ Part-Time _____ |
| Address: | Duties: |
| Phone: Supervisor's Name: | Skills: |
| Dates Employed From: To: | Base Salary or Wage: Start: End: |
| Reason(s) for leaving: | |

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| Reason(s) for leaving: | |

Additional Information: List any other experience/skills that you believe contribute to your qualifications:

If relevant to the job, other languages you:

speak _____ write _____ read _____

References: List below four persons, other than relatives, who can provide character and employment references:

| Name | Position | E-mail Address | Phone |
|------|----------|----------------|-------|
| | | | |
| | | | |
| | | | |
| | | | |

I hereby certify that this application was completed by me and that all entries on it and information in it are true and complete to the best of my knowledge. I understand that false or misleading information given in this application, in my interview(s), or otherwise in the application process will void this application or subject me to discharge at any time. I expressly acknowledge and understand that in the absence of a written contract to the contrary, my status, if I am hired, will be that of an employee at will having no contractual right, express or implied, to remain in the AZC's employ.

I also expressly acknowledge and understand that, as a not-for-profit religious organization, the AZC is exempt from state unemployment insurance. Therefore, its employees are not eligible to receive benefits for this programs.

I authorize the employing organization and its agents to confirm information supplied on this application and résumé and to conduct a background check to investigate my suitability for employment and authorize my prior employers and schools that I have attended, to disclose to AZC information contained in my personnel file. This investigation may include information on my character, general reputation, personal characteristics and mode of living. By signing below, I release all parties from all claims, damages and liability that may result from furnishing information about me to AZC and using that information in considering my employment application.

Please sign here indicating that you have read and agree to the above.

Signature of Applicant

Date