



Andrews Memorial Baptist Church  
 303 W. Elm Street  
 Graham, NC 27253  
 (336) 228-7801

FOR OFFICE USE ONLY:  
 Start \_\_\_\_\_  
 W/D \_\_\_\_\_

**EMPLOYMENT APPLICATION**  
 FOR NON-MINISTERIAL POSITIONS

Application Date: \_\_\_\_\_

**POSITION APPLIED FOR:** \_\_\_\_\_

PLEASE SELECT APPROPRIATE MINISTRY

**ANDREWS MEMORIAL BAPTIST CHURCH**     **ANDREWS MEMORIAL READINESS SCHOOL**     **CAMP DEER LAKE**

**AVAILABLE START DATE:** \_\_\_\_\_

**ARE YOU OVER THE AGE OF 18?**     **YES**     **NO**

**INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Home telephone:(\_\_\_\_) \_\_\_\_\_ email: \_\_\_\_\_ sex:  Male  Female

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**QUALIFICATIONS**

**ACADEMIC ACHIEVEMENTS**

School: \_\_\_\_\_ Degree: \_\_\_\_\_ Date completed: \_\_\_\_\_

School: \_\_\_\_\_ Degree: \_\_\_\_\_ Date completed: \_\_\_\_\_

School: \_\_\_\_\_ Degree: \_\_\_\_\_ Date completed: \_\_\_\_\_

**CONTINUING EDUCATION**

Course taken: \_\_\_\_\_ Date completed: \_\_\_\_\_

Course taken: \_\_\_\_\_ Date completed: \_\_\_\_\_

Course taken: \_\_\_\_\_ Date completed: \_\_\_\_\_

**PROFESSIONAL ORGANIZATIONS**

Membership: \_\_\_\_\_

Membership: \_\_\_\_\_

First Aid training?  YES     NO    Date completed: \_\_\_\_\_

CPR training?     YES     NO    Date completed: \_\_\_\_\_

**PREVIOUS WORK EXPERIENCE**

Company: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Job Description: \_\_\_\_\_ Employment dates: \_\_\_\_\_

Company: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Job Description: \_\_\_\_\_ Employment dates: \_\_\_\_\_

Company: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Job Description: \_\_\_\_\_ Employment dates: \_\_\_\_\_

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Company: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Job Description: \_\_\_\_\_ Employment dates: \_\_\_\_\_

**PREVIOUS VOLUNTEER EXPERIENCE**

Organization: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Volunteer description: \_\_\_\_\_ Service dates: \_\_\_\_\_

Organization: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Volunteer description: \_\_\_\_\_ Service dates: \_\_\_\_\_

Organization: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Volunteer description: \_\_\_\_\_ Service dates: \_\_\_\_\_

**REFERENCES** *please list at least three individuals who are not blood related and have known you for at least three years*

Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Daytime telephone:(\_\_\_\_) \_\_\_\_\_ Evening telephone:(\_\_\_\_) \_\_\_\_\_ Time known: \_\_\_\_\_  
Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Daytime telephone:(\_\_\_\_) \_\_\_\_\_ Evening telephone:(\_\_\_\_) \_\_\_\_\_ Time known: \_\_\_\_\_  
Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Daytime telephone:(\_\_\_\_) \_\_\_\_\_ Evening telephone:(\_\_\_\_) \_\_\_\_\_ Time known: \_\_\_\_\_  
Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Daytime telephone:(\_\_\_\_) \_\_\_\_\_ Evening telephone:(\_\_\_\_) \_\_\_\_\_ Time known: \_\_\_\_\_  
Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Daytime telephone:(\_\_\_\_) \_\_\_\_\_ Evening telephone:(\_\_\_\_) \_\_\_\_\_ Time known: \_\_\_\_\_  
Relationship: \_\_\_\_\_

**CRIMINAL RECORD:**

Have you ever been convicted of or pled guilty to either a misdemeanor or felony crime, including but not limited to drug-related charges, child abuse, other crimes of violence, theft, or motor vehicle violations?  YES  NO

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WAIVER AND CONSENT:**

I, \_\_\_\_\_, hereby certify that the information I have provided on this application for employment is true and correct. I authorize Andrews Memorial Baptist Church, Andrews Memorial Readiness School, and/or Camp Deer Lake to verify the information I have provided on this application by contacting the references and employers I have listed, by conducting a criminal records check, or by other means, including contacting others whom I may not have listed. I authorize the references and employers listed to share whatever information they may have regarding my character and fitness for the job for which I have applied. Furthermore, I waive any rights I may have to confidentiality.

In the event that my application is accepted and I become employed by Andrews Memorial Baptist Church, Andrews Memorial Readiness School, and/or Camp Deer Lake, I agree to abide by and be bound by the policies of Andrews Memorial Baptist Church, Andrews Memorial Readiness School, and/or Camp Deer Lake, and refrain from inappropriate conduct in the performance of my duties on behalf of the ministries of Andrews Memorial Baptist Church, Andrews Memorial Readiness School, and/or Camp Deer Lake.

I have read this waiver and the entire application, and I am fully aware of its contents. I sign this consent freely and under no duress or coercion.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_