

Any individual who, because of a disability, needs accommodation or assistance in completing this application or at any time during the application process, should contact the Human Resources team. All applicants will receive consideration without discrimination because of race; color; sex; national origin; age; pregnancy, childbirth, or a related medical condition; veteran status; marital status; disability; religious affiliation, except where a category is determined to be a bona fide occupational qualification; sexual orientation; gender identity; genetic information; ancestry; or any other category protected by applicable law.

Personal Data

Name *(Last, first, middle)*

Address

City _____ State _____ ZIP _____

Home phone () _____ Daytime phone () _____

Position desired _____ Salary desired _____

Have you ever worked under another name? Yes No If yes, give name _____

Date available to start _____

Have you ever been discharged or terminated by a previous employer? Yes No

If yes, please explain. _____

Are you:

A previous applicant? Yes No **If yes**, date/what position? _____

A previous employee? Yes No **If yes**, dates/title _____

Related to any current Board of Pensions employee(s)? Yes No

If yes, give name(s)

Legally able to work in the United States? Yes No

Check to indicate source of referral:

Advertisement - Name of publication: _____

Board of Pensions employee - Name: _____

Employment/search firm - Name: _____

Web site - Please specify: _____

Other: _____



Employment Record

List current or most recent employer first. Complete all areas even if a resume is attached.

Present/last employer _____

Type of business _____

Phone () _____

Start date _____

Leave date _____

Current base pay \$ _____

Other pay \$ _____

Title _____

Supervisor/title _____

May we contact? Yes No

Description of position responsibilities

Reason for leaving



Prior employer

Type of business

Phone ()

Start date

Leave date

Title

Supervisor/title

May we contact? Yes No

Description of position responsibilities

Reason for leaving

Next prior employer

Type of business

Phone ()

Start date

Leave date

Title

Supervisor/title

May we contact? Yes No

Description of position responsibilities

Reason for leaving



Education and Training

Please complete all appropriate items.

Type of school	Name and address of school	Dates attended	Name of degree earned and date	Major and minor fields of study
High school or trade school				
Business or technical school				
Colleges				
Postgraduate				
Other or additional training/ certification <i>(Explain)</i>				

Additional Qualifications

What experience, knowledge, special technical or computer skills, publications, awards, and/or individual capabilities do you have which especially prepare you for this position?

Military Experience

Branch of service:

Dates of service:

List of duties in the service, including schools and training:

Professional References

Name	Employer/title	Phone ()
Name	Employer/title	Phone ()
Name	Employer/title	Phone ()

Authorization and Release

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application, withdrawal of any employment offer, and/or immediate separation from The Board of Pensions of the Presbyterian Church (U.S.A.) of services if I have been employed.

I understand that nothing contained in this application or in the granting of an interview is intended to create an employment relationship with The Board of Pensions of the Presbyterian Church (U.S.A.). If employed, I understand that my employment relationship with The Board of Pensions of the Presbyterian Church (U.S.A.) is of an at-will nature, which means that I or The Board of Pensions of the Presbyterian Church (U.S.A.) may terminate my employment at any time with or without cause, and that this at-will employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an officer of The Board of Pensions of the Presbyterian Church (U.S.A.).

I further agree that, if employed, I will abide by all the rules and regulations of The Board of Pensions of the Presbyterian Church (U.S.A.).

I authorize The Board of Pensions of the Presbyterian Church (U.S.A.) to investigate all statements contained in this application, including making inquiries of former employers, schools, and references, by telephone or other means, to obtain information concerning my previous employment, personal character, habits, and disposition. I hereby release The Board of Pensions of the Presbyterian Church (U.S.A.) and any former employer, school, reference, or other person that may provide information to The Board of Pensions of the Presbyterian Church (U.S.A.) from any liability relating to the furnishing of such information.

Signature	SS #	Date of Birth
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(Required for state-wide criminal background check)

Fair Credit Reporting Act - Job Applicant Disclosure and Authorization

To: *(Name of Applicant)*

As an applicant for employment with The Board of Pensions of the Presbyterian Church (U.S.A.), you are hereby notified that the application process includes an investigation of your background. This information may relate to your past employment history, references, driving record, criminal history, credit history and other information bearing on your character, reputation, personal characteristics and/or mode of living.

The Federal Fair Credit Reporting Act (the "Act") protects certain categories of background information contained in "consumer reports." To the extent that The Board of Pensions of the Presbyterian Church (U.S.A.) procures information on job applicants in "consumer reports" furnished by "consumer reporting agencies," it will comply with all applicable provisions of the Act.

Under that Act, The Board of Pensions of the Presbyterian Church (U.S.A.) is required to disclose in writing that it may procure information about you from "consumer reports" for purposes of evaluating your job application and suitability for employment. In order to process your job application, you will be required to authorize The Board of Pensions of the Presbyterian Church (U.S.A.) to obtain such information. If you have questions about the Fair Credit Reporting Act or your rights as a "consumer," you may contact the Consumer Financial Protection Bureau.

By signing below, you certify that The Board of Pensions of the Presbyterian Church (U.S.A.) has provided you with a copy of this Disclosure, that you have read it and understand its terms and that you authorize and consent to the procurement of "consumer reports" by The Board of Pensions of the Presbyterian Church (U.S.A.) containing information about you.

Signature

Date *(mm/dd/yyyy)*
