

APPLICATION FOR EMPLOYMENT

Date:	
Full Name:	Social Security Number:
Address:	Telephone Number:
How long have you been at this address?	Do you have the legal right to work in the United States?
Has anyone ever brought or discussed bringing a civil	l or criminal claim against you alleging physical or sexual abuse?
If your application is considered favorably, on what da	ate will you be available for work?
What prompted you to seek employment at the Christ	tian Academy of Western New York?
Briefly describe why you feel you could be an asset to	CAWNY?
	t event in your life?
What do you consider to be the second most importar	nt event in your life?
	<u>Education</u>
High School:	Year of Graduation:
College or Technical Training:	
Degree Held:	
School Name and Address:	
Majors and Number of Hours:	
Minors and Number of Hours:	
Degree Held:	

Colle	ege or Technical Training continued:		
Scho	ool Name and Address:		
Majo	rs and Number of Hours:		
Mino	rs and Number of Hours:		
Degr	ree Held:		
Scho	ool Name and Address:		
Majo	rs and Number of Hours:		
Mino	ors and Number of Hours:		
Degr	ree Held:		
		Work Preference	
Wha	t type of work do you prefer?		
Wha	t would be your second choice?		
Plea	se list any other job skills which you posses	s:	
		Work Experience	
If pre	esently employed, may we contact your emp	oloyer?	
List a	all employers you have had during the last f	ive years, starting with present or most	recent employer:
1.			
		ervisor)	
	(Address)	(City)	(State and Zip)
	Telephone Number: ()	Position:	
	If a teaching position, list subjects taugh		
		<u> </u>	
2.	(Name)	(Supe	ervisor)
	(A.1.1	(0:1)	(0) (1, 2, 1, 7, 1)
	(Address)	(City)	(State and Zip)
	If a teaching position, list subjects taugh		
	Employed from: to	Reason for leaving:	

Work Experience continued:

3.	(Name)		(Supervisor)		
	(Address)		(City)	(State and Zip)	
	Telephone Number: ()	Position:		
	If a teaching position, list su	bjects taught: _			
	Employed from:	to	Reason for leaving:		
			<u>References</u>		
Prese	ent Pastor's Name:				
Addre	ess:				
Telep	ohone Number: ()				
Name	e and Address of church:				
If you	have attended your present ch	nurch for more t	han one year, give the name of your pre	evious pastor and church:	
Previ	ous Pastor's Name:				
Addre	ess:				
Telep	phone Number: ()				
Name	e and Address of church:				
List b	elow three persons who are we	ell acquainted w	ith you, not including relatives, former to	eachers or employers:	
1.	(Name)		Telephone Number: ()	
	(Name)				
	(Address)		(City)	(State and Zip)	
2.	(Name)		Telephone Number: ()	
	(rtains)				
	(Address)		(City)	(State and Zip)	
3.			Telephone Number: ()	
	(Name)				
	(Address)		(City)	(State and Zip)	

The facts set forth on all four pages of my application are true and complete. I understand that if employed, any false
statement on this application may result in my dismissal. I further understand that this application is not, and is not intended to
be, a contract of employment, nor does this application obligate the Academy in any way if the Academy decides to employ me.
I understand that my employment is on an at-will basis.

I authorize you to make such investigations and inquiries of my personal, employment and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

Signature:	Date:	