



# Application For Employment

4108 Morsay Drive  
Rockford, IL 61107

(Please print answers to all questions & use a black pen)

Today's Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Position Desired \_\_\_\_\_

Type of employment desired Full-Time  Part-Time

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

Address: \_\_\_\_\_  
Street City State Zip Code

Telephone Numbers/Email Address: \_\_\_\_\_  
Home Cell E-mail

Are you eligible for employment in the USA? Yes  No  (If yes, verification will be required).

Social Security Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Drivers License: \_\_\_\_\_  
Number State Exp. Date of License

Have you ever been convicted of a crime? Yes  No   
(Conviction will not necessarily disqualify you from employment.)

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s), and type(s) of rehabilitation:

\_\_\_\_\_  
\_\_\_\_\_

Do you have any relatives or family members currently employed at The Pregnancy Care Center?  Yes  No

(If yes, please indicate name and nature of the relationship.) \_\_\_\_\_

Can you with or without reasonable accommodation perform the essential functions of the job?  Yes  No

**Education:**

High School: Number of years completed (*circle one*) 1 2 3 4 Diploma: \_\_\_Yes \_\_\_No  
or G.E.D.: \_\_\_Yes \_\_\_No

Name of School: \_\_\_\_\_

College and/or Vocational School: Number of years completed (*circle one*) 1 2 3 4 5 6 7

Name of School(s): (1) \_\_\_\_\_ (2) \_\_\_\_\_

(3) \_\_\_\_\_ (4) \_\_\_\_\_

Areas of Study: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

Degrees Earned (Date): \_\_\_\_\_

**Employment History:**

List most recent employment first. May we contact your present employer? \_\_\_Yes \_\_\_No

Employer: \_\_\_\_\_ Date of employment: From \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Title: \_\_\_\_\_ Position/Duties: \_\_\_\_\_

Salary: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Date of employment: From \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Title: \_\_\_\_\_ Position/Duties: \_\_\_\_\_

Salary: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Date of employment: From \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Title: \_\_\_\_\_ Position/Duties: \_\_\_\_\_

Salary: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**Additional Information:**

- 1. What is your reason for seeking employment here? \_\_\_\_\_  
\_\_\_\_\_
  
- 2. What special skills, talents, gifts or personality traits would you bring to this ministry?  
\_\_\_\_\_  
\_\_\_\_\_
  
- 3. This organization is a pro-life, faith-based ministry. We believe that our faith in Jesus Christ empowers us, enables us, and motivates us to provide help and hope to those facing unplanned pregnancy in this community. Please write a brief statement about how your faith would affect your work if hired.  
\_\_\_\_\_  
\_\_\_\_\_

**References:**

Please provide at least two employment references and at least two personal references (*including your pastor*):

Name: \_\_\_\_\_ Years Acquainted: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Years Acquainted: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Years Acquainted: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**APPLICANT'S CERTIFICATION AND AGREEMENT**

I certify that the facts set forth in this employment application are true and complete to the best of my knowledge, and I authorize my prospective employer to verify their accuracy and to obtain reference information on my work performance and character. I give permission to my prospective employer to conduct a criminal background check to the extent that the position for which I am applying may involve interaction with minors. I release my prospective employer and any person or entity providing such reference information from any and all liability relating to the provision of such information or relating to any employment decisions made based upon such information. I understand that, if employed, any falsified statements or omissions of material information on this application may lead to my prompt dismissal. If I am offered and accept employment, I agree to fully adhere to the policies and rules of my prospective employer. However, I understand that neither the existence of such policies and rules nor anything said during my interview process shall be deemed to create an express or implied employment contract. I UNDERSTAND THAT ANY EMPLOYMENT THAT MAY BE OFFERED TO ME WILL BE FOR AN INDEFINITE DURATION AND ON AN AT-WILL BASIS. I understand that either my prospective employer or I will have the right to terminate any such employment at any time with or without notice or cause.

I further certify that I have read and that I am in full agreement with The Pregnancy Care Center's Statement of Faith and Statement of Principle.

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