Episcopal Diocese of San Diego

Application for Church Workers

Name of Applicant:_____

Name of Church: _____

Location of Church: _____

Church Position Sought: _____

Section I – General Information

All Applicants Must Complete This Section

(Where a resume is also submitted, information on that resume need not be repeated here.)

Date of application: _____

Applicant's name: _____

Last First Middle

Applicant's current address: _____

_____

Applicant's social security number: _____

Applicant's home telephone (with area code):_____

1. Have you ever used a name that is different from the one listed on this application (for example, married, maiden, a.k.a.)?

If so, list all such names: _____

2. Do you have a driver's license? _____

If yes, what state issued the license? _____

What is your driver's license number? _____

NOTE: In order to verify identity of applicants, we ask applicants to show their driver's license to the person conducting their interview.

3. List your last two previous home addresses (street, apartment number if applicable, city, state, and zip code):

Address One: _____

_____

Address Two: _____

_____

Name of Applicant: _____

4. List where you went to school and the year you graduated (if you did not graduate, please note.):

High School: _____

Year graduated: _____

College: _____

Year graduated: _____

Graduate School: _____

Year graduated: _____

5. List your employers for the past ten years:

Employer One:

Date of employment:_____

Position held: _____

Name of employer: _____

Address of employer (street, city, state): _____

_____

Telephone number of employer:_____

Contact Person for employer: _____

Employer Two:

Date of employment:_____

Position held: _____

Name of employer: _____

Address of employer (street, city, state): _____

_____

Telephone number of employer:_____

Contact Person for employer: _____

Employer Three:

Date of employment:_____

Position held: _____

Name of employer: _____

Address of employer (street, city, state): _____

_____

Telephone number of employer:_____

Contact Person for employer: _____

Name of Applicant: _____

Name of employer: _____

Telephone number of employer: _____

Contact Person for employer: _____

6. On what date will you be available to begin work? _____

7. What is the minimum length of your commitment to this position? _____

8. Have you ever had a business or professional license revoked or suspended?

If so, give full details: _____

_____

_____

9. Are you currently the member of a church?

If so, list its name and address, and how long you have been a member:

_____

_____

10. List the name and address of any other churches that you have regularly attended during the past five years.

_____

_____

_____

_____

Please list three personal references. (Do not list former employers or relatives)
Address include: city, state, zip code

Name: _____

Complete Address: _____

_____

Telephone (with area code): _____

Name: _____

Complete Address: _____

_____

Telephone (with area code): _____

Name: _____

Complete Address: _____

_____

Telephone (with area code): _____