

## 312 Locust Street Kannapolis, NC 28081 704.932.6138

Email: nkchristianacademy.org

## **Employment Application**

|                     |                            | Applicant            | Informa    | ation  |                 |                      |          |
|---------------------|----------------------------|----------------------|------------|--------|-----------------|----------------------|----------|
| Full Name:          |                            |                      |            |        |                 | Date:                |          |
|                     | Last                       | First                |            |        | M.I.            |                      |          |
| Address:            | Street Address             |                      |            |        |                 | Apartment/Unit ‡     | <i>‡</i> |
|                     |                            |                      |            |        |                 |                      |          |
|                     | City                       |                      |            |        | State           | ZIP Code             |          |
| Phone:              |                            |                      | Email      |        |                 |                      |          |
| Date Availa         | ble:                       | Social Security No.: |            |        | Desired         | d Salary: <u>\$</u>  |          |
| Position App        | plied for:                 |                      |            |        |                 |                      |          |
| Are you a ci        | itizen of the United State | YES NO               | If no, a   | re you | authorized to w | YES ork in the U.S.? | NO       |
| Have you e          | ver worked for this compa  | YES NO any?          | If yes,    | when?_ |                 |                      |          |
| Have you e          | ver been convicted of a f  | YES NO elony?        |            |        |                 |                      |          |
| If yes, expla       | in:                        |                      |            |        |                 |                      |          |
|                     |                            | Edu                  | cation     |        |                 |                      |          |
| High Schoo          | l:                         | Address              | S:         |        |                 |                      |          |
| From:               | To:                        | Did you graduate     | YES<br>? 🗆 | NO     | Diploma:        |                      |          |
| College:            |                            | Address              | s:         |        |                 |                      |          |
| From:               | To:                        | Did you graduate     | YES        | NO     | Degree:         |                      |          |
| Graduate<br>School: |                            | Address              | s:         |        |                 |                      |          |
| From:               | To:                        | Did you graduate     | YES<br>?   | NO     | Degree:         |                      |          |

| Business<br>/Tech |   |                  |             |           |  |  |
|-------------------|---|------------------|-------------|-----------|--|--|
| School:           | Address:                                  |                  |             |           |  |  |
| From:             | To: Did you graduate?                     | YES NO           | Degree:     |           |  |  |
|                   | Refer                                     | ences            |             |           |  |  |
| Please list three | e professional references.                |                  |             |           |  |  |
| E !! N!           | •   |                  | Relationshi | 'n:       |  |  |
| Componi           | Relationship:  Phone:                     |                  |             |           |  |  |
| Address:          |   |                  |             | <u> </u>  |  |  |
|                   |   |                  |             | -         |  |  |
| Compone           |   |                  |             | p:        |  |  |
| Address:          |   |                  | FIIOII      | e:        |  |  |
| Full Name:        |   |                  | Relationshi | p:        |  |  |
| Company:          |   |                  |             | e:        |  |  |
| Address:          |   |                  |             |           |  |  |
|                   | Previous E                                | mployment        |             |           |  |  |
| Company:          |   |                  | Phon        | e:        |  |  |
| Address:          |   |                  |             | or:       |  |  |
| Job Title:        | Starting S                                | alary:\$         | Ending      | Salary:\$ |  |  |
| Responsibilities: |   |                  |             |           |  |  |
| From:             | To:                                       | Reason for I     | _eaving:    |           |  |  |
| May we contact y  | your previous supervisor for a reference? | YES              | NO          |           |  |  |
|                   |   |                  | Di .        |           |  |  |
| A -1-1            |   |                  |             | e:        |  |  |
| Address:          |   |                  | Superviso   | or:       |  |  |
| Job Title:        | Starting S                                | alary: <b>\$</b> | Ending      | Salary:   |  |  |
| Responsibilities: |   |                  |             |           |  |  |
| From:             | To:                                       | Reason for I     | _eaving:    |           |  |  |
| May we contact y  | your previous supervisor for a reference? | YES              | NO 🗆        |           |  |  |

| Company:  |   |  |  | Phone:_   |  |  |
|---|---|--|--|---|--|--|
| Address:  |   |  |  | Supervisor:_  |  |  |
| Job Title:  | Starting Salary:  |  |  | Ending Salary: <b>\$</b>  |  |  |
| Responsibilities:   |   |  |  |   |  |  |
| From:   | To:   | Reason fo  | or Leaving:  |   |  |  |
| May we contact you  | r previous supervisor for a reference?  | YES  | NO   |   |  |  |
|   | Military  | Service  |  |   |  |  |
| Branch:   |   |  | From:  |   | To:  |  |
| Rank at Discharge:  |   | Type of Discharge:                                     |  |   |  |  |
| If other than honorab   | ole, explain:   |  |  |   |  |  |
|   | Disclaimer a  | and Signa  | ture   | _   | _  |  |
| investigation of th<br>Academy to conta<br>officials and law e<br>Academy. I also u | ation for employment with North keen information given in the applicated act my references, previous employen forcement authorities. If employen anderstand that a misstatement or properties of the most action of the most action of the most action is a misstatement or properties. | Kannapolistion and copyers, physed, I agreed an omissi | Christian<br>onsent for<br>sicians, ho<br>to abide<br>on of info | the represer<br>ospitals, scho<br>by all policies<br>rmation requ | ntatives of the cols attended, court is as set forth by the ested shall be |  |
| I certify that my a   | nswers are true and complete to t   | he best of   | my knowl   | edge.   |  |  |
| Signature:  |   |  |  | Date:   |  |  |

| Personal Testimony   |  |  |  |
|--|--|--|--|
| Church you presently attend:   |  |  |  |
| How long a member?   |  |  |  |
| Pastor's Name:   |  |  |  |
| Please share with us your testimony about your life before you met Christ, how you met Christ and your life with Christ now. |  |  |  |
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| Signature: Date:   |  |  |  |