



*touching lives, transforming communities*

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Hudson, OH 44236

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[www.iglworld.org](http://www.iglworld.org)

## Employment Application

### Personal Data

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

How many hours per week do you desire to work? \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_ If yes, please describe the circumstances.

Do you have any personal responsibilities/limitations that may affect attendance? If yes, please explain.

Have you ever been disciplined by a professional body or state agency [such as having a license suspended or revoked]? If yes, please explain.

Have you participated in a drug or substance abuse program or been convicted for the possession or use of any narcotic or controlled substance? If yes, please explain.

## **Position Information**

What position are you seeking? \_\_\_\_\_

What other types of work would you be willing to do? \_\_\_\_\_

\_\_\_\_\_

## **Educational Background**

Highest level of education completed \_\_\_\_\_

Please describe your educational background including references to schools attended, degrees earned and any special training or continuing education worth noting.

## Work Experience

Please list your 5 most significant positions beginning with the most recent.

Position held: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

\_\_\_\_\_  
May we contact your supervisor for a reference?

Primary Responsibilities:

Position held: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

\_\_\_\_\_  
May we contact your supervisor for a reference?

Primary Responsibilities:

Position held: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

\_\_\_\_\_  
May we contact your supervisor for a reference?

Primary Responsibilities:

Position held: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

\_\_\_\_\_  
May we contact your supervisor for a reference?

Primary Responsibilities:

Position held: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

\_\_\_\_\_  
May we contact your supervisor for a reference?

Primary Responsibilities:

Experience with computer software and number of years experience with each:

\_\_\_\_\_ Microsoft Word \_\_\_\_\_

\_\_\_\_\_ Excel \_\_\_\_\_

\_\_\_\_\_ Access \_\_\_\_\_

\_\_\_\_\_ Powerpoint \_\_\_\_\_

\_\_\_\_\_ Publisher \_\_\_\_\_

\_\_\_\_\_ Other \_\_\_\_\_  
\_\_\_\_\_

Describe any other office experience that would be beneficial in your employment.

## **General Information**

What do you consider to be your special talents/abilities that can be effectively used in the ministry?

What are your personal strengths?

## **General Health**

Please identify any limitations which would impact your ability to work or travel.

## **Christian Walk**

Please address the following:

- A brief write up of your spiritual journey to present

## Ministry Experience

- Please describe any ministry experience you have including volunteer work, missions/field experiences, or professional job experience in a ministry related field not covered in a previous section of this application

## References

Please provide the names and contact information for references. We ask for at least two professional references who can speak to your performance in a previous or current employer/employee relationship as well as two personal references who can speak to us regarding your personal character and spiritual development.

### Professional References

Name \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Relationship to you \_\_\_\_\_

Name \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Relationship to you \_\_\_\_\_

Name \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Relationship to you \_\_\_\_\_

**Personal References**

Name \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Relationship to you \_\_\_\_\_

Name \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Relationship to you \_\_\_\_\_

Name \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Relationship to you \_\_\_\_\_



## Terms of Employment

***I understand that India Gospel League is an “at will” employer and that employment may be terminated at any time with or without cause. No information distributed or representations made by any representative of India Gospel League should be construed as an attempt to alter the “at will” status of this position unless a written contract is entered which specifically addresses and replaces its “at will” employment status.***

***I understand that India Gospel League is a nonprofit ministry organization and as such is not required to participate in state or federal unemployment compensation programs. Therefore, in the event of the termination of employment, there is no opportunity to collect unemployment compensation.***

***I understand that this application may be withdrawn or my employment terminated if I have made any misrepresentation on this form.***

***I authorize India Gospel League to contact the individuals listed as references for the purpose of inquiring about my background with respect to prospective employment with IGL. This may include former employers, character references, and background checks. I release IGL and all other persons or companies from liability for furnishing such information.***

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(Signature)

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(Date )