

Community of Faith Church 101 Belle Street Raymond, Illinois 62560

Phone: 217-229-4535

	Job Appli	cant Information - Sec	retari	al (Part Time)		
Full Name:					Date:	
	Last	First		M.I.		
Address:						
, , , , , , , , , , , , , , , , , , , ,	Street Address				Apartment/U	nit #
	City			State	ZIP Code	
Phone:		Email				
riione.		Lillali				
Date Availa	ble:	De	sired Sa	alary	per hour	
Are you a ci	itizen of the United States	YES NO .? If no, ar	e you a	uthorized to worl	YES k in the U.S.?	NO
	ver been convicted of a	YES NO				
felony?	ver been convicted of a					
If yes evola	in:					
ii yes, expia	in:					
		Education				
High Schoo	l:	Address:				
		YES	МО			
From:	To:	_ Did you graduate?		Diploma:		
College:		Address:				
F	T	YES	NO	D		
From:	10:	Did you graduate?		Degree:		
Other:		Address:				
		Addiess.				
From:	To:	YES Did you graduate?	NO	Degree:		

Work History				
Name of Company/Organization				
Address: (Street, City, State, Zip)				
Dates of Employment				
May we contact for a reference? Yes No:				
Name of Person to contact:				
Phone Number and E-mail where he/she can be reached:				
Name of Company/Organization				
Address: (Street, City, State, Zip)				
Dates of Employment				
May we contact for a reference? Yes No:				
Name of Person to contact:				
Phone Number and E-mail where he/she can be reached:				
Name of Company/Organization				
Address: (Street, City, State, Zip)				
Dates of Employment				
May we contact for a reference? Yes No:				
Name of Person to contact:				
Phone Number and E-mail where he/she can be reached:				
COMPUTER EXPERIENCE List all computer software programs you are proficient in: Example: Word				

Publisher, Excel, etc.

References

Please list three references (do not use immediate family as a reference).					
Name:					
Address:					
Phone:	E-mail:				
Relationship to this person: (Supervisor, co-wor	ker, friend, etc.)				
Name:					
Address:					
Phone:	E-mail:				
Relationship to this person: (Supervisor, co-wor	ker, friend, etc.)				
Name:					
Address:					
Phone:	E-mail:				
Relationship to this person: (Supervisor, co-worker, friend, etc.)					
Disclaim	er and Signature				
I certify that my answers are true and complete to th	e best of my knowledge.				
If this application leads to employment, I understand interview may result in my release.	that false or misleading information in my application or				
Signature:	Date:				