



Calvary Children's Home

1430 Lost Mountain Road
Powder Springs, GA 30127

Application for Employment

Snyder Turner – Executive Director

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calvarykids.org

Pre-Employment Questionnaire

(Please print plainly)

Personal

Date: _____

Name _____ Social Security No. _____
(Last) (First) (Middle)

Present Address _____ Phone _____
(Street) (City) (State) (Zip)

How long have you lived at above address _____ U. S. Citizen? _____

Previous address _____
(Street) (City) (State) (Zip)

Date of birth _____ Sex M _____ F _____
Month Day Year

Marital Status: Single Married Separated Divorced Widowed Date of Marriage _____

Number of dependents including yourself _____ Number of children _____

Their ages _____ Do you pay child support? _____ If yes, are you current _____ or in arrears _____

Does your wife/husband work _____ If yes, occupation _____ His/Her earnings \$ _____

Do you own your own home? _____ Rent? _____

Have you had a major illness in the past 5 years? _____ If yes, describe _____

Have you received compensation for injuries? _____ If yes, describe _____

Employment Desired

Position _____ Date available _____ Salary desired _____

Are you employed now? _____ If so, may we inquire of your present employer? _____

Would you work: Full-Time _____ Part-Time _____ Specify days and hours of part time _____

Were you previously employed by us _____ If yes, when? _____

Person to be notified in case of accident or emergency

Name Address Phone

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work with children? _____

Do you have a commercial driver's license? _____ Do you have computer skills? _____

TEN YEAR EMPLOYMENT HISTORY

Employer and Address	Occupation	DATES		Rate Hourly or Monthly	Reason for leaving
		From	To		

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand that in the event of employment by Calvary Children's Home, that the first six months shall be considered a probationary period during which time it shall be the company's sole right to decide upon the employee's fitness and capabilities to fill the position for which he was employed.

Date _____

Signed _____

List any friends or relatives working for us _____
 Name Relationship

 Name Relationship

REFERENCES

Give below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Occupation	Phone
1.			
2.			
3.			

SERVICE RECORD

Branch of Service _____ Discharge Date & Rank _____
 Present membership in National Guard or Reserves? _____ Date obligation ends _____

EDUCATION

School level	Name and location of school	Number of years attended	Did you graduate? Date	Course/Major
Grammar School				
High School				
College				
Any Other				

Have you been convicted of a felony or misdemeanor within the last 5 years? Yes _____ No _____

Describe _____

Do you smoke? _____