

**Dock Mennonite Academy
STAFF APPLICATION**



PERSONAL INFORMATION

Name _____
Last
First
Middle

Address _____

Social Security Number _____ Phone Number _____

Email Address _____

In case of emergency notify _____

EDUCATIONAL BACKGROUND

Education	Name of School or Institution and Location	Date Graduated	Course Taken
High School			
College			
Trade or Business School			

EMPLOYMENT DESIRED

Position _____ Date you can start _____

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

FORMER EMPLOYERS (List below at least two employers, starting with the last one first).

Dates	Name of Employer and Address	Your Title
From	_____ _____	_____ Reason for Leaving
	Phone Number _____	_____ _____
To	Work Performed _____ _____ _____	
Name and Title of Supervisor		Final Yearly Salary

Dates From _____ _____	Name of Employer and Address _____ _____ Phone Number _____	Your Title _____ Reason for Leaving _____ _____
To _____ _____	Work Performed _____ _____ _____	
Name and Title of Supervisor		Final Yearly Salary

Identify the kinds of qualities and skills you bring to the job that would qualify you for this position. Also, give one area in which you would feel *least* qualified for in this position.

REFERENCES

 Pastor

 Address and phone number

 Non-relative who has known you for many years

 Address and phone number

 Work Supervisor

 Address and phone number

How would your employment at Dock Mennonite Academy be related to or expressive of your Christian faith?

Date _____

Signature _____