

1825 S. Alma School Rd. Compass, AZ 85286 480-963-3997 FAX 480-963-4229 Website: www.compassaz.church

APPLICATION FOR THEIMYOUTENTE

Compass Christian Church is an Equal Opportunity Employer

Personal Information		
Name (Last, First, Middle):		Date:
Social Security Number: Birt	Birthdate:	
Home Address:		
City:	State:	Zip:
Mobile Phone:	Email:	
Home Phone:	Business Phone:	
Can you prove you have the right to work in the U.S.	Yes	No
Are you a member of Compass Christian Church?	Yes	No
If not a member, are you willing to become a member of Compass Christian Church?	Yes	No
Are you a member of another church? If so, which one?	Church Name:	
Position You Are Applying For		
Title:	Salary Range:	
Referred by:	Date You Can Start:	
Education Record		
High School (Name, City, State):		
Business or Technical School (Name, City, State):		
Dates Attended:	Degree Earned:	
Undergraduate College (Name, City, State):		
Dates Attended:	Degree, Major:	

Graduate School (Name, City, State):			
Dates Attended:	Degree, Subject:		
Work History (give information about your last 3 jobs	, starting with the most recent)		
1-Employer	Dates Employed:	Dates Employed:	
Address:			
City:	State:	Zip:	
Phone:	Ending Salary:	Ending Salary:	
Title/Duties:			
Manager's Name and Title:			
Reason for Leaving:			
2-Employer	Dates Employed:	Dates Employed:	
Address:			
City:	State:	Zip:	
Phone:	Ending Salary:	Ending Salary:	
Title/Duties:			
Manager's Name and Title:			
Reason for Leaving:			
3-Employer	Dates Employed:	Dates Employed:	
Address:			
City:	State:	Zip:	
Phone:	Ending Salary:		
Title/Duties:			
Manager's Name and Title:			
Reason for Leaving:			

Personal References			
1-Name:			
Work Phone:	Home Phone:		
Address:			
City:	State:	Zip:	
Relationship to You:			
2-Name:			
Work Phone:	Home Phone:		
Address:			
City:	State:	Zip:	
Relationship to You:			
3-Name:			
Work Phone:	Home Phone:	Home Phone:	
Address:			
City:	State:	Zip:	
Relationship to You:			
Business References (if applying for your fir	st job, you may use academic referen	ces)	
1-Name:			
Work Phone:	Home Phone:	Home Phone:	
Address:			
City:	State:	Zip:	
Relationship to You:			
2 Nome:			
2-Name:	11 8		
Work Phone:	Home Phone:		
Address:			

City:	State:	Zip:		
Relationship to You:				
3-Name:				
Work Phone:	Home Phone:			
Address:				
City:	State:	Zip:		
Relationship to You:				
Please Read and Sign				
I understand that this application may be withdrawn or my employment may be terminated if I have made any misrepresentations on this form. I authorize the church to contact all references to seek job-related information about me, and I release the church and all other persons and companies from liability for furnishing or obtaining such information.				
Signature:		Date:		