

# Employment & Volunteer Application

## Shawnee Nazarene Academy

a ministry of Shawnee Church of the Nazarene 5539 Quivira Rd. Shawnee, KS 66216 913-631-5555

Name:			Date:
	First	Middle	Last
Address:			City/State/ZIP:
How long ha	ve you lived	l at your current addr	ress?
Home Phon	e:	Business Ph	hone: SSN:
Email:		Da	ate of Birth:
Biological Se	x: M F	Drivers License (Stat	ate)/Number:
Marital Statu	s: Single	Married Widowed	Divorced Spouse's Name
Position for	which you a	re applying:	
with your cu or volunteer e	rrent emplo		r employment and/or volunteer experiences, starting kwards. (Please use back of page for additional employment
Employer			☐ Full Time ☐ Part-time from: to:
Address			Position
Phone			Responsibilities
Supervisor			
Reason for leaving			
Employer			☐ Full Time ☐ Part-time from: to:
Address			Position
Phone			Responsibilities
Supervisor			
Reason for leaving			

Employer	Full Time Part-time from: to:
Address	Position
Phone	Responsibilities
Supervisor	
Reason for leaving	
Employer	☐ Full Time ☐ Part-time from: to:
Address	Position
Phone	Responsibilities
Supervisor	
Reason for leaving	
satisfaction and why?	
EDUCATION/BACKGROUND List school schools and other special training.  LEVEL NAME OF SCHOOL C	ols attended, beginning with high school. Include tech  ITY/STATE MAJOR/MINOR DEGREE
	ol/Secondary School
Univ	ersity/College
Vocati	onal/Technical
Graduate	School/Seminary

**REFERENCES** (Please include complete address, city, state, zip code)

\* Two professional and two personal references (non-family members only).

PROFESSIONAL	L/CIVIC				
Name		Address			
City	State	Zip	email	phone	
Name		Address			
City	State	Zip	email	phone	
PERSONAL					
Name		Address			
City	State	Zip	email	phone	
Name		Address			
City	State	Zip	email	phone	
PERSONAL: Addresses in the	e past seven yea	ars: (Use back o	f page for addition	onal addresses)	
Other names by	which you hav	re been known	(Nicknames, mai	den names, aliases):	
CHILDREN					
Name	Age	Gender	Grade	School	

#### LEGAL HISTORY

For a	ıny "yes	" answers, please attach a detailed explanation in writing.
Y	N	Have you ever been convicted of a criminal offense (felony or misdemeanor)? Answer "yes" if you have entered a plea agreement including a deferred sentence or deferred judgment arrangement in connection with a criminal case.
Y	N	Have you ever been charged with a sexual offense, offense relating to children, or Crime of violence?
Y	N	Have you ever reported to any organization or registry for abuse or misconduct Involving children?
Y	N	Do you have any disciplinary action or investigation pending by an employer, Other organization, professional association, or licensing body, for violence, Sexual misconduct, or misconduct involving children?
Y	N	Have you ever been disciplined or dismissed from any volunteer or employment position for any reason or following an allegation of sexual misconduct, physical Aggression, verbal aggression, or other inappropriate behavior or conduct?
Y	N	Have you ever been reprimanded, or asked to leave or end your membership in a church?
Y	N	Have you ever been the subject of a complaint or disciplinary proceeding concerning any professional license or professional affiliation held by you?
Y	N	Do you now or have you ever sought out or intentionally viewed child Pornography?
•	_	larly attend church? □No □Yes and for how long?
	ribe why	y you might feel God has called you to serve in the ministry of the Shawnee Nazarene

# Shawnee Nazarene Academy Ministry Safe Form for Employees

#### **Confidential**

This application should be completed by all applicants for any employment position involving the supervision of minor children or vulnerable adults, such as elderly or impaired persons. This is not an employment application. The purpose of this form is to assist in the creation of a safe environment for children and students who participate in the programs of Shawnee Nazarene Academy, a Ministry of Shawnee Church of the Nazarene or use of Shawnee Church of the Nazarene facilities.

Full Name:
List any talents, vocations, preparation, training or other experiences which have equipped you to work with children.
Why do you want to work with children at Shawnee Nazarene Academy?
Do you have a preference concerning the age group or sex of children or students with whom you would like to work? Why?
What is your philosophy concerning redirection or discipline of children?
When you are unhappy, angry or emotional about a person or circumstance, what do you do?

Have you experienced any significant physical or emotional stresses within the past year, such as the loss of a parent, spouse, or child, extreme ill health, or any emotional or physical crisis? If so, please briefly explain. (Use back of page if necessary.)
Have you ever physically or sexually abused a child?
Has someone ever accused you of abusing a child?

#### **CONSENT FORM**

I authorize Shawnee Nazarene Academy to contact all individuals, organizations and references listed on this **Ministry Safe Form** in order to verify the information I have provided. I agree to release from liability any person or organization that provides information concerning me, including those persons I have listed as references, as well as contact persons from my previous employers listed on this application.

I specifically authorize Shawnee Church of the Nazarene on behalf of Shawnee Nazarene Academy to undertake a criminal background check concerning my past. Additionally, I understand a link for Ministry Safe training will be provided. I agree to complete the training and required assessment in a timely manner. Proof of successful completion of this training will be kept on file at the school.

I understand and agree that any information received from the background check and application verification will not be disclosed to me, and I hereby waive any right I may have to inspect any information provided about me by any person or organization identified by me on this form.

By signing this form, I certify and affirm that the information I have given on this form is true, complete and correct in all respects.

Signature: Date:
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**See Reference Form** attached. Please complete the reference form providing one clergy reference (if applicable), one child-related work or volunteer reference, and one family member. Please contact these references and inform them an authorized staff person will be contacting them.

Shawnee Nazarene Academy cares for our students. We understand that the answers to these questions are private and sometimes deeply personal; your privacy will be protected.

## MINISTRY SAFE REFERENCE FORM

(If using previous reference on this application, include name and indicate "same" for contact information.)

Address	City and State	Zip Code	Telephone Numbers
	Address	Address City and State	Address City and State Zip Code

# Statements and Agreed Code of Conduct

Please initial each of the f	following statements:
	statements contained in my Ministry Safe Form are true. I any misrepresentation or omission is cause for dismissal from any ministry
work with childre criminal backgr	my references and contacts from prior church or non – church en, students, or disabled adults will be contacted and that an appropriate ound check will be conducted. I authorize investigations of all statements application. I specifically authorize the church to undertake a criminal k of my past.
I understand that	I can withdraw from the application process at any time.
TOLERANCE F understand that the investigate all case	Shawnee Nazarene Academy has a policy of ZERO FOR ABUSE and takes all allegations of abuse seriously. I further the Shawnee Nazarene Academy cooperates fully with the authorities to ses of alleged abuse. Abuse of any kind is grounds for immediate dismissal ment position and possible criminal charges.
abuse, sexual abus	n not a pedophile or child molester. I have not perpetrated physical se, emotional abuse or neglect against a child, student or disabled adult, and accused of these acts.
situations may be that refusal to info	agree that false statements regarding past conduct and/or present grounds for denial of this application to provide employment services, and form the Shawnee Nazarene Academy of the contents of a sealed criminal in the automatic denial of the application.
•	as an employee, I agree to read and abide by all policies and procedures y Shawnee Nazarene Academy.
Signature:	Date: