

**RECYCLING GRACE WOMEN'S CENTER  
EMPLOYEMENT APPLICATION**

**DATE:** \_\_\_\_\_

**POSITION DESIRED:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_

**DRIVERS LICENSE NUMBER:** \_\_\_\_\_

**MARITAL STATUS:**

**SINGLE** \_\_\_\_\_ **MARRIED** \_\_\_\_\_ **WIDOWED** \_\_\_\_\_ **DIVORCED** \_\_\_\_\_

**SEPARATED** \_\_\_\_\_ **REMARRIED** \_\_\_\_\_ **ENGAGED** \_\_\_\_\_

**SPOUSE'S NAME:** \_\_\_\_\_

**YEARS MARRIED:** \_\_\_\_\_

**NUMBER OF CHILDREN:** \_\_\_\_\_

**CURRENT PLACE OF EMPLOYMENT:** \_\_\_\_\_

**TITLE/POSITION:** \_\_\_\_\_

**WORK PHONE:** \_\_\_\_\_

**Can you be reached at work? YES** \_\_\_\_\_ **NO** \_\_\_\_\_

**EDUCATION AND WORK EXPERIENCE**

**Do you hold a college degree(s)? If so what?** \_\_\_\_\_

**Please list any current or previous work experience you have had.**

**NAME OF COMPANY:** \_\_\_\_\_

**YEARS SERVED:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**SUPERVISOR:** \_\_\_\_\_

**NAME OF COMPANY:** \_\_\_\_\_

**YEARS SERVED:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**SUPERVISOR:** \_\_\_\_\_

**NAME OF COMPANY:** \_\_\_\_\_

**YEARS SERVED:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**SUPERVISOR:** \_\_\_\_\_

**SPIRITUAL BACKGROUND:**

**PLEASE SUMMARIZE YOUR SPIRITUAL HISTORY (CHURCH AFFILIATIONS, FAITH EXPERIENCE AS RELATED TO YOUR BELIEFS)**

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**PERSONAL REFERENCES**

Give **THREE** references, other than spouse or family, who are qualified to speak of your spiritual experience and service.

**NAME, ADDRESS, CITY/STATE/ZIP, PHONE, RELATIONSHIP**

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

**Have you ever been convicted of any offense against the law? (You may omit minor traffic violations)**

**YES \_\_\_\_\_ NO \_\_\_\_\_**

**If yes, please explain.**

\_\_\_\_\_

\_\_\_\_\_

**Have you ever committed or been accused, charged or alleged to have committed any act of neglecting, abusing or molesting any children? YES \_\_\_\_\_ NO \_\_\_\_\_**

**If yes, please explain in detail, providing date and place of incident.**

\_\_\_\_\_

\_\_\_\_\_

**Have you abused drugs or alcohol; or been concerned that you may have a problem with alcohol, pornography or any other addictions; or has anyone ever suggested that you may have a problem with any of the above? YES \_\_\_\_\_ NO \_\_\_\_\_**

\_\_\_\_\_

**If yes, please explain.**

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**Have you been treated for a mental disorder?**

**YES \_\_\_\_\_ NO \_\_\_\_\_ If yes, please explain.**

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**APPLICANT’S CERTIFICATION AND AGREEMENT**

**I hereby certify that the facts set forth in this initial application are true and complete to the best of my knowledge. I understand that discovery or falsification of any statement or significant omission of facts may prevent me from obtaining a position or may subject me to immediate dismissal from that position. I authorize Recycling Grace Women’s Center to verify all data given in my application and my oral interview from the personal references listed in this application. I have carefully read and do understand the above statements.**

**I HAVE READ AND UNDERSTAND THE STATEMENT ABOVE AND THE VOLUNTEER HANDBOOK AND AGREE TO COMPLY WITH THE STATED REQUIREMENTS AND EXPECTATIONS.**

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**Signature of Applicant and Date**

**PLEASE RETURN TO:**

**Recycling Grace Women’s Center  
503 Apple St.  
Poplar Bluff, Missouri 63901**

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