



ST. JOHN LUTHERAN SCHOOL APPLICATION FOR EMPLOYMENT

Date of application _____ Position applied for _____

Name of applicant _____

Mr./Mrs./Ms. First Middle Last

Current Address _____

Number/Street City/State/Zip code

Phone Number _____ Birth Date _____

Email address _____

Married: Single: Name of spouse: _____

Children: _____ Names of children: _____

ACADEMIC BACKGROUND

High School:

	Name	City	Date of Graduation
College:			

	Name	City	Degree Earned

WORK EXPERIENCE

Employer	Address	Type of work	Dates

PERSONAL REFERENCES (excludes relatives) List three.

Name

Address

Phone

CHURCH YOU ATTEND

Name

Address

Phone

Name of Pastor(s): _____

Briefly provide some insight into who you are and why you are applying for employment at St. John Lutheran School:

I hereby declare that the information given here is true, correct and complete to the best of my knowledge and belief.

Signature of

Applicant _____ Date _____