



Christian Care Academy LLC



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 Anna, TX 75409
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Application for Employment

Instruction: Print clearly in black or blue ink. Answer all questions. Sign and date the form.

Personal Information

Application Date: _____

First Name: _____ Middle: _____ Last Name: _____

Date of Birth: _____ Social Security No. _____

Driver's License Number: _____ State Issued: _____

OR
 State Issued ID Number: _____ State Issued: _____

If under age 18, please list age _____

Street Address _____

City _____ State _____ Zip Code _____

How Long _____

Phone Number: _____

Email: _____

Are you eligible to work in the United States? Yes _____ No _____

Have you been convicted of or pleaded no contest to a felony within the last five years?
 Yes _____ No _____

If yes, explain: _____

Position/ Availability:

Position Applied for: _____

Days/ Hours Available:

No Pref _____
Monday _____
Tuesday _____
Wednesday _____
Thursday _____
Friday _____

Employment Desired:

Full Time Only _____
Part Time Only _____
Either _____

When are you available to start work? _____

How many hours can you work weekly? _____

Education

Type of School	Name of School	Location City, State	Number of Years	Major & Degree
High School				
College				
Bus. Or Trade				
Professional				

Skills and Qualifications: Licenses, Skills, Training, Awards _____

Work Experience:

Please list your work experience for the past 2 years beginning with your most recent job held. If you were self-employed, give company name. Attach additional sheets if necessary.

Present or Last Position: May we contact your present employer? Yes No

Employer: _____
Address: _____ City, State, Zip Code _____
Supervisor: _____ Phone: _____
Position Title: _____ Salary _____
From: _____ To: _____
Responsibilities: _____

Reason for Leaving:

Employer: _____
Address: _____ City, State, Zip Code _____
Supervisor: _____ Phone: _____
Position Title: _____ Salary _____
From: _____ To: _____
Responsibilities: _____

Reason for Leaving:

References: Please list 2 professional references and 1 personal reference other than previous employers and relatives.

Name	_____	Company	_____
Address	_____	Phone	_____
Name	_____	Company	_____
Address	_____	Phone	_____
Name	_____	Company	_____
Address	_____	Phone	_____

Emergency Contact: Please list the person(s) to be contacted in case of emergency.

Name _____ Phone _____
Name _____ Phone _____

Agreement (Please read carefully before signing)

I certify that all the information on this application is accurate and complete to the best of my knowledge. I understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment. I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with Christian Care Academy creates an actual or implied contract of employment. I understand that, if I accept employment with Christian Care Academy, it will be on an at-will basis. This means that either Christian Care Academy or I have the right to terminate the employment relationship at any time, for any reason, with or without cause. I agree to submit to drug and alcohol testing, if requested by Christian Care. I release Christian Care Academy, and its employees, plus other persons or companies, from any and all liability arising out of or related in any way to such testing.

I authorize Christian Care Academy to investigate information concerning my education, employment, experiences, and all other aspects of my background relevant to my proposed employment. I release Christian Care Academy and its employees from all liability arising from such investigation.

Signature of Applicant: _____

Date: _____