



426 South McDuff Avenue, Jacksonville, Florida 32254

## EMPLOYMENT APPLICATION

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Dear Applicant,

Since you have expressed a desire to partner with us in a career opportunity, we would like to share the purpose and work of the City Rescue Mission, Inc. The City Rescue Mission (CRM) is a Christian Recovery Ministry serving the homeless and the needy through the love and compassion of Jesus Christ. We are a privately funded, not-for-profit 401(c)3 organization that has provided help to less fortunate men, women and families since 1946. At the center of our efforts, we believe Jesus Christ is the only person who can change a person from within – who gives meaning, purpose and direction in life.

Because the number of applications we receive is greater than the number of available employment opportunities, your application will be kept active for 90 days. Each application is carefully evaluated. All portions of the application must be filled out properly in order to qualify for consideration. Expect a contact call if you qualify for the position for which you've applied.

CRM is an equal opportunity employer and abides by all federal and state laws and subsequent laws, which have amended it. We consider qualified applicants for specific positions without discrimination because of race, color, age, sex, national origin, handicap, disability, or marital status. We also comply with the Americans With Disabilities Act of 1990. During the interview process, you may be asked questions concerning your ability to perform job-related functions. If you are given a conditional offer of employment, you may be required to complete a post-job medical history questionnaire and/or undergo a medical examination. All employees are required to take a drug test.

Please print all requested information throughout this application beginning below. Your interview begins with this document. Thank you for considering CRM as a place to use the skills, knowledge and abilities God has entrusted to you.

In the Spirit of Excellence,

Human Resources

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First Name

Last Name

Position Applied For

Date

## APPLICATION FOR EMPLOYMENT

Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle Initial

Present Address: \_\_\_\_\_  
Street Address City State

Permanent Address: \_\_\_\_\_  
Street Address City State

Phone No.: \_\_\_\_\_ Referred by: \_\_\_\_\_

If related to anyone who works for the Mission,  
 State Name, Department and Location: \_\_\_\_\_

In Case of Emergency, Please Notify: \_\_\_\_\_  
Name Address and Telephone Number

### EMPLOYMENT DESIRED

Position: \_\_\_\_\_ Date You Can Start: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Are you employed now?  Yes  No      May we inquire of your present employer?  Yes  No

Have you ever applied to the Mission before?  Yes  No    Where? \_\_\_\_\_ When? \_\_\_\_\_

Are there any days, shifts or hours you will not work? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

### EDUCATION

	Name & Location	Degree/Certificate	Subjects Studied	Grade Average
Grammar School:				
High School:				
College:				
Trade, Business or Correspondence School:				
Other (including graduate school):				

Have you ever been convicted of, or pled guilty, no contest or *nolo contendere* to a crime?  Yes  No  
 If yes, give details (date, place, offense(s), disposition, etc.): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been charged with a crime and either been placed on a court-ordered probation, had adjudication withheld, entered a pre-trial intervention program or have any criminal charges now pending:  Yes  No  
 If yes, give details (date, place, offense(s), disposition, etc.): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been a defendant in a civil action for intentional tort(s) (e.g. assault, battery, intentional infliction of emotional distress), or an unlawful employment practice (e.g. sexual or racial harassment):  Yes  No  
 If yes, give details (date, place, disposition, etc.): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**PREVIOUS EMPLOYMENT:** list below sequentially all of your employers in the last ten (10) years beginning with your current or most recent employer (use additional pages, if necessary).

Date: Month & Year	Name, Address, Telephone	Position and Job Duties	Salary	Reason for Leaving
From: To:				
From: To:				
From: To:				
From: To:				

Did you work for any of these employers under a different name:  Yes  No  
 If yes, which employer(s) and under what name(s)? \_\_\_\_\_  
 \_\_\_\_\_

Please explain any gaps in your employment history: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you received any written reprimands or disciplinary suspension during any employment?  Yes  No  
 If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been discharged or asked to resign?  Yes  No  
 If yes, please explain (include by whom, when and for what): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**DRIVING RECORD**

Do you have a valid driver's license?  Yes  No What class of license do you possess? \_\_\_\_\_  
 Driver's License Number: \_\_\_\_\_

Have you had your license or driving privileges revoked, suspended or placed on probation?  Yes  No  
 If yes, please explain (include when, where and what action was taken): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

How many speeding or other moving violations have you received in the last three (3) years? \_\_\_\_\_

List below all traffic violations (except parking) on your record for the last five (5) years and all motor vehicle accidents in which you were involved (use additional pages if necessary).

Date	Location	Description	Result

REFERENCES: Give the names of three persons not related to you, whom you have worked with for at least one year and the name of one personal reference that has known you for at least one year.

Name	Address & Telephone	Business	Years Acquainted

### **EMPLOYMENT APPLICATION CERTIFICATION**

I hereby certify that all of the facts and information listed on this employment application are true and complete. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application. I also understand and agree that any such false, incomplete, or misleading information discovered on this application at any time after I am employed may result in my dismissal.

I hereby authorize the City Rescue Mission or an independent contractor to investigate all statements contained in this application and to interview the references and previous employers listed in this application. I authorize the references and previous employers listed to give the CRM all facts, opinions and evaluations concerning my previous employment and any other information they may have, personal or otherwise, and release all such parties from any liability which may allegedly arise from furnishing such information to CRM, including but not limited to, any liability for defamation or invasion of privacy.

If I am offered employment, I understand that such an offer will be conditioned upon satisfactory results of a background investigation and/or CRM medical examination or inquiry, including a drug screen test. If then employed, I understand that I will be required to serve a ninety (90) day probationary period. I further understand that my employment and compensation can be terminated, with or without cause or notice, at any time, regardless of the successful completion of my probationary period, at the option of either the Mission or myself. I understand that no supervisor or other representative of the Mission other than the Executive Director has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I further understand and voluntarily agree as a condition of employment or my continued employment, that I may be requested by CRM to submit to a urinalysis or other drug screen test and that my failure to take such test(s) when requested to do so or unsatisfactory test results will disqualify me from consideration for employment, or if I am then employed, may result in my immediate dismissal.

I certify that I have read, understand and agree with the above.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date