

Name:

Last First

Position:

Application for Employment



Operation Blessing International Relief and Development, Corp.

*The Mission of Operation Blessing International
is to demonstrate God's love by alleviating
human need and suffering in the United States
and around the world.*

PERSONAL INFORMATION

Mr. _____ Date: _____
 Mrs. _____
 Ms. _____
 Last Name First Middle

Phone: (H) _____ (C) _____ Email Address: _____

Current Address: _____
 Street City State ZIP How Long? Date Available to Work

Previous Address: _____
 Street City State ZIP How Long? Minimum Salary Requirement

Are you responding to an advertisement? **YES** **NO** Please indicate how you learned of this job opening. _____

• Have you previously been an employee of OB or one of its affiliates? **YES** **NO** Company/Department: _____ Date: _____

• If yes, what name did you use? _____

• Do you have any relatives currently working at OB or any of its affiliates? **YES** **NO** If yes, what is his/her name and relationship to you? _____

• Are you eligible to work in the U.S.? **YES** **NO** If no, please explain _____
(You will be required to provide proof of your eligibility to work in the U.S. at the time of hiring.)

• Do you in any degree use...
 Illegal Drugs: **YES** **NO** Have you ever been convicted of a felony? **YES** **NO**
 Alcohol: **YES** **NO** Please explain:
 Tobacco: **YES** **NO** _____

EDUCATION

	SCHOOL NAME AND LOCATION	NUMBER OF YEARS	DEGREE EARNED	MAJOR
High School				
College				
Graduate/Other				

SKILLS, LICENSES, CERTIFICATIONS

List things such as CPA, Certifications, Computer Programs, Office Skills, Language Skills, Equipment Operated

EMPLOYMENT HISTORY

Company Name: _____ Type of Business: _____ Salary: _____

Address: _____ Telephone: _____ Position Title: _____

Date Started: _____ Date Left: _____ Last Immediate Supervisor: _____ Reason for Leaving: _____

Duties/Responsibilities:

Company Name: _____ Type of Business: _____ Salary: _____

Address: _____ Telephone: _____ Position Title: _____

Date Started: _____ Date Left: _____ Last Immediate Supervisor: _____ Reason for Leaving: _____

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Duties/Responsibilities:

PERSONAL MISSION STATEMENT - Please tell us in what way you share Operation Blessing's vision and purpose. (See front of application.)

1. I hereby certify the information on this application and attachments to be true and correct. I agree that any misrepresentation or omission of facts will invalidate my application; and should I be hired, the aforementioned may be sufficient cause for my dismissal.
2. I understand and agree that employment is for no definite period and may be terminated at any time without prior notice. I further agree that the company has the right to release any information concerning my employment including, but not limited to my character, habits, abilities, and cause of separation; and I release the company from any and all liability concerning such information.
3. I understand and agree that Operation Blessing policy, as a Christian ministry, is one of non-use of alcohol, tobacco and illegal drugs. If hired, I agree to comply with the policy, both on and off Operation Blessing and CBN premises.
4. AUTHORIZATION AND RELEASE

Any Past or Present Employer, Supervisor or Co-worker, Former or Present Neighbors, References, or Institutions, U.S. Armed Forces, U.S. Selective Service System, Maritime Service, State Motor Vehicle Departments, OR

Any Academic Dean, Registrar, Principal, Guidance Counselor, other authorized person at a School (college, business, trade or high school) OR

Any Credit Reporting Agencies or Retail Merchants Association, OR

Any County, City, State or Federal Law Enforcement Agency, Clerk or other authorized person at any County, City, State or Federal court.

I, _____, am aware that my background may be investigated in connection with my application for employment and/or during any subsequent employment by Operation Blessing International Relief and Development (Operation Blessing), and I hereby authorize and request the release of any and all information anyone addressed above may have concerning me to Operation Blessing, its subsidiaries, or its agents.

I hereby release Operation Blessing, its subsidiaries and their respective officers, directors, employees, representatives and agents from any liability for damages of whatever kind to me, my family, heirs or associates as a result of such background investigation or as a result of my being granted or denied employment. I agree that a photocopy of this Authorization and Release is valid as the original.

Date: _____ Signature: _____