



**DOING
THE MOST
GOOD™**

Application for Employment

The Salvation Army USA Southern Territory

This application form is designed for applicants seeking employment in various regular full-time and part-time positions.

Note: If selected for review, only applicants who indicate the relevant education and experience requirements, as indicated in the job description for the applicable position, may be considered. Please include a resume, if available and answer questions completely, honestly and to the best of your ability. All information will be treated confidentially, as necessary. Those applicants requiring accommodation to the application and/or interview process should contact a representative of the Human Resources Department at the applicable location.

All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability or veteran status.

Electronic Application for Employment available on-line at www.salvationarmycareers.org

Personal Information

Date of Application:

Name: *First* *Middle* *Last*

Address: *Street* *City* *State* *Zip*

Home Telephone Number: *Cellular Telephone Number:* *Business Telephone Number:*

When is the best time to call? May we contact you at work? Yes No

Email Address:

How were you referred to us?

- | | |
|--|---|
| <input type="checkbox"/> Salvation Army Careers Website | <input type="checkbox"/> State Employment Service |
| <input type="checkbox"/> Salvation Army Employee (indicate name) _____ | <input type="checkbox"/> Employment/Staffing Agency |
| <input type="checkbox"/> Job Board (indicate job board name below; e.g. CareerBuilder, Indeed.com, etc.) _____ | <input type="checkbox"/> School/University/College |
| | <input type="checkbox"/> Other _____ |

Employment Desired

Indicate the position and location for which you are applying: Minimum salary/hourly rate desired: \$ Date available to begin work:

If you are applying for a driver position, please indicate what size vehicle you are applying to drive:
 under 10,000 lbs. 10,000 – 26,000 lbs. over 26,000 lbs.

Type of employment desired (check all that apply): Full-Time Part-time Casual

Days and Hours Available:

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From (hour)							
To (hour)							

Do you have any commitments to another employer that might affect your employment with us, including confidentiality, non-disclosure or non-competition agreements or do you have or anticipate having another job, part-time or otherwise, if employed by The Salvation Army?

Yes No If yes, please explain: _____

Application for Employment (Continued)

Employment History

List your last four (4) employers or assignments, beginning with the most recent, including military experience. If you are applying for a driver position, please list all employers for the past 10 years. (Summarize and attach as a separate document, as necessary.)

Employer: _____ Address: _____ Telephone Number: _____ Hourly Rate /Salary Starting _____ Final _____	Immediate Supervisor's Name: _____ Your Job Title: _____ Dates Employed: From: _____ (MM/DD/YYYY) To: _____ (MM/DD/YYYY) Summarize the nature of the work performed by you and your job responsibilities _____ Reason for Leaving: _____
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	

Employer: _____ Address: _____ Telephone Number: _____ Hourly Rate /Salary Starting _____ Final _____	Immediate Supervisor's Name: _____ Your Job Title: _____ Dates Employed: From: _____ (MM/DD/YYYY) To: _____ (MM/DD/YYYY) Summarize the nature of the work performed by you and your job responsibilities _____ Reason for Leaving: _____
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	

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May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	

Employer: _____ Address: _____ Telephone Number: _____ Hourly Rate /Salary Starting _____ Final _____	Immediate Supervisor's Name: _____ Your Job Title: _____ Dates Employed: From: _____ (MM/DD/YYYY) To: _____ (MM/DD/YYYY) Summarize the nature of the work performed by you and your job responsibilities _____ Reason for Leaving: _____
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	

If you responded "No" to the question "May we contact for reference?" in the employment section above, please respond as to why:

Please explain any gaps in employment that may be present in your employment history:

Application for Employment (Continued)

Qualifications and Skills

Summarize any special training, skills, licenses, certifications and/or characteristics of yourself that might qualify you as being able to perform job-related functions for the position for which you are applying.

Educational Data

List the last three (3) schools attended, starting with the most recent

School	No. of Years Completed	Degree/Certification

Do you have a High School Diploma or GED? Yes No

Languages

List any language(s) you know and check the boxes that describe your skill level

Language	Speak Some	Speak Fluently	Read	Write
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Information

Please include any additional information that will be helpful in considering you for employment, such as additional work experience, accomplishments, activities, etc. [Please exclude all information indicative of age, religion, gender (unless applicable to position), race, national origin, disability or veteran status.]

Indicate religious affiliation only if required for the position (as defined in the job description minimum requirements):

Active uniform-wearing Salvationist in good standing: Yes No Not Applicable

Christian (Non-Salvationist): Yes No Not Applicable

Application for Employment (Continued)

General Information

- Are you legally eligible for employment in the United States? Yes No
- Are you below the age of 18? Yes No
- Do you have a valid Driver's License (if job related)? Yes No

If yes, identify the type of Driver's License you possess and the State issued:

Commercial Operator:

Class A Class B Class C

Other (indicate type): _____

State issued: _____

Have you ever been convicted as an adult of a felony? Yes No

**If yes please indicate the following: Type of conviction, date of conviction and the state/county/country conviction occurred:*

Within the last two years, have you been convicted as an adult of a misdemeanor which resulted in incarceration? Yes No
(incarceration means any time served in county jail, state or federal prison, etc.)

**If yes, please indicate the following: Type of conviction, date of conviction and the state/county/country conviction occurred*

NOTE: In some states, a disposition of "Adjudication Withheld" or "Deferred Adjudication" is equivalent to a conviction.

***A felony or misdemeanor conviction may not, necessarily disqualify you from the position requested. However, failure to list all applicable convictions, other than those for which the records have been expunged or sealed, may disqualify you from further consideration.**

Have you ever been employed by The Salvation Army? Yes No

If previously employed by The Salvation Army using a different name, list name(s): _____

Identify the date(s) and location(s) of your previous Salvation Army employment, if applicable (use separate sheet, if necessary).

NOTE: Proof of previous employment must be provided.

Territory	Division/Command	Corps/Unit	Dates of Employment Beginning/Ending Dates (Month/Day/Year)

Are you a former Salvation Army Officer? Yes No

If yes, list your previous appointments (use separate sheet, if necessary). **NOTE: Proof of previous appointment must be provided.**

Territory	Division/Command	Corps/Unit	Date of Appointments Beginning/Ending Dates (Month/Day/Year)

Do you have any relatives who are employees or Salvation Army Officers at The Salvation Army location to which you are applying?

Yes No If yes, please indicate their name, relationship to you and Department/Unit: _____

If an offer of employment with The Salvation Army is extended, you may be asked for your authorization to conduct a background check and/or to obtain your credit report. Would you be willing to authorize a background check, if required?

Yes No (Note: Indicating "yes" does not constitute authorization to initiate a background check; doing so only indicates you would be willing to sign the required authorization forms.) If a background check is required, employment with The Salvation Army is contingent upon the approval of your background check report.

Application for Employment (Continued)

References

List the names and telephone numbers of at least three (3) business/work references who are NOT related to you.
If not applicable, list at least three (3) school or personal references who are NOT related to you.

Name	Company	Telephone Number	Relationship

*"I certify that the information contained in this application is true and complete. I authorize investigation of all statements contained in this application and understand that any false or misleading statements or material omissions are cause for termination of employment, if employed. I hereby authorize former and present employers, references and other sources to provide or verify any information they may have regarding me or my employment with them to The Salvation Army, and release them from any liability arising from the furnishing of any employment information.

I further agree and understand that, except as governed by existing federal, state or local law, where applicable, my employment or an offer of employment establishes no guarantee of continued employment or obligation beyond pay for actual work performed at the agreed upon rate of pay and that my employment may be terminated at any time by myself or The Salvation Army, at either party's option and will."

(For applicants in Maryland: "Under Maryland law, an employer may not require or demand, as a condition of employment, prospective employment, or continued employment, that an individual submit to or take a lie detector or similar test. An employer who violates this law is guilty of a misdemeanor and subject to a fine not exceeding \$100.00").

_____ **Print Name**

_____ **Signature ***

_____ **Date**

For Human Resources Department Use Only

RECOMMEND

Name: _____

Job Title: _____

Department: _____

Location: _____

Start Date: _____ **End Date*:** _____

(temporary or seasonal employment)*

Pay Rate: _____ **per** _____

To Replace: _____

Date Terminated/Transferred: _____

Finance Board/Council Approval

Administrative Review*

Administrative Approval*