



PO Box 338  
Montezuma KS 67867

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Email: mail@mua.faith

## APPLICATION FOR EMPLOYMENT

Date of application

\_\_\_\_\_

First Name

Middle Initial

Last Name

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Address

City

State

Zip

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cell Phone

Home Phone (optional)

Email

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Gender

Date of Birth

Number of dependents

M  F

\_\_\_\_\_

\_\_\_\_\_

Marital status

Congregation of church membership

\_\_\_\_\_

\_\_\_\_\_

Desired pay range (hourly)

Are you currently employed?

Available Start Date

\_\_\_\_\_

Y  N

\_\_\_\_\_

Level of education

Any specialized training, trade school, degrees, etc.?

\_\_\_\_\_

\_\_\_\_\_

Please list your areas of highest proficiency, special skills, or other items that may contribute to your abilities to perform the position you are applying for.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

On a scale of 1 to 10, please rate yourself in the following areas with 1 being the lowest and 10 being the highest.

Proficiency with Microsoft Word	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Proficiency with Microsoft Excel	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Proficiency with Microsoft Outlook	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Proficiency with Microsoft Teams	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Proficiency with FileCenter	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Touch typing skill	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Touch number key pad skill	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Ability to work as a team member	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Ability to work independently	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Ability to avoid being distracted	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Comfortable speaking on the phone	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
OK with confrontation when necessary	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Comfortable with new technology	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10

References (other than employers) – please list at least two. Examples: pastor, teacher, mentor, house parent, youth leader, etc.

Name	Relationship	Telephone
_____	_____	_____
Name	Relationship	Telephone
_____	_____	_____
Name	Relationship	Telephone
_____	_____	_____

Previous Employment – Please list beginning from current employment or most recent.

Start Date	End Date	Company Name	Location
_____	_____	_____	_____

Your Role or Title	Manager's Name	Company Phone	Manager's Cell Phone
_____	_____	_____	_____

Job notes, tasks performed, and reason for leaving

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Start Date	End Date	Company Name	Location
_____	_____	_____	_____

Your Role or Title	Manager's Name	Company Phone	Manager's Cell Phone
_____	_____	_____	_____

Job notes, tasks performed, and reason for leaving

\_\_\_\_\_

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Start Date	End Date	Company Name	Location
_____	_____	_____	_____

Your Role or Title	Manager's Name	Company Phone	Manager's Cell Phone
_____	_____	_____	_____

Job notes, tasks performed, and reason for leaving

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