

ST. OLAF LUTHERAN CHURCH EMPLOYMENT APPLICATION

Date: _____

Name: _____ Social Security Number _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone: (h) _____ (w) _____ Email _____

Position you are applying for:

Experience that relates to this position:

Date available to start: _____

What hours and days are you available to work? _____

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

Are you over the age of 18? Yes _____ No _____

Have you ever applied, worked or volunteered at St. Olaf Lutheran Church before? Yes ___ No ___

If Yes Explain: _____

Educational Background

	Name/Location	Year Graduated	Degree	Areas of concentration
High School				
College				
Other				

Church/Faith Related Experience: _____

Youth related Experience: _____

Leadership Experience:

Other :

*****A Background check will be completed upon offer of employment

Please send resume and Application to:

St. Olaf Lutheran Church

601 6th St. NE.

Devils Lake, ND 58301