



# Orphan Outreach®

## APPLICATION FOR EMPLOYMENT

**FULL NAME:** \_\_\_\_\_ Date: \_\_\_\_\_  
*first middle last*

**ADDRESS:** \_\_\_\_\_  
*street city state/country zip/postal code*

**PHONE:** (home) \_\_\_\_\_ (cell) \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**POSITION APPLYING FOR:** \_\_\_\_\_ **Salary desired: \$** \_\_\_\_\_

**Available to Begin:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Type of Position Applying For** (*check all that apply*)  Full Time  Part Time  Internship  Contract

Why are you applying? \_\_\_\_\_  
\_\_\_\_\_

Who referred you to us? \_\_\_\_\_

What office equipment and/or software applications can you operate? \_\_\_\_\_  
\_\_\_\_\_

What special skills and qualifications do you have? \_\_\_\_\_  
\_\_\_\_\_

Foreign languages? (indicate degree of competence): \_\_\_\_\_  
\_\_\_\_\_

Are you 18 years or older?  Yes  No

Are you legally entitled to work in the United States of America?  Yes  No

Have you ever been convicted of, or entered a guilty plea or pleas of nolo contendere, to a crime (felony or misdemeanor), excluding minor traffic violations?  Yes  No

Have you been previously employed by Orphan Outreach?  Yes  No  
If so, when? and where? \_\_\_\_\_  
\_\_\_\_\_

Have you had any relatives or friends employed by Orphan Outreach?  Yes  No  
If so, please give names and relationships. \_\_\_\_\_  
\_\_\_\_\_

**EDUCATION**

**GRADUATE?**

**DEGREE FIELD**

**HIGH SCHOOL**

\_\_\_\_\_  
*School City State/Country*

Yes  No

\_\_\_\_\_

**VOCATIONAL TECHNICAL TRAINING**

\_\_\_\_\_  
*School City State/Country*

Yes  No

\_\_\_\_\_

**COLLEGE/UNIVERSITY**

\_\_\_\_\_  
*School City State/Country*

Yes  No

\_\_\_\_\_

**COLLEGE/UNIVERSITY**

\_\_\_\_\_  
*School City State/Country*

Yes  No

\_\_\_\_\_

**OTHER EDUCATION OR TRAINING**

\_\_\_\_\_  
*School City State/Country*

Yes  No

\_\_\_\_\_

Are you studying at the present time? If so, what and where?

\_\_\_\_\_

Please list school, civic, community activities/ organizations, offices held, honors:

\_\_\_\_\_

\_\_\_\_\_

**MILITARY STATUS**

**BRANCH:**

**DATES:**

**RANK:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## JOB HISTORY

In the following spaces, give a complete record of your employment, including, if any, periods of self-employment. Begin with your most recent employment and work back. For dates of employment, list both the month and year. If additional space is needed, attach a supplementary sheet.

Are you presently employed?

Yes  No

If so, may we contact your present employer?

Yes  No

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

I. **NAME OF PRESENT/LAST EMPLOYER:** \_\_\_\_\_

Address: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Supervisor's Name and Position \_\_\_\_\_ Phone No.: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

II. **NAME OF PRESENT/LAST EMPLOYER:** \_\_\_\_\_

Address: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Supervisor's Name and Position \_\_\_\_\_ Phone No.: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

III. **NAME OF PRESENT/LAST EMPLOYER:** \_\_\_\_\_

Address: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Supervisor's Name and Position \_\_\_\_\_ Phone No.: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

IV. **NAME OF PRESENT/LAST EMPLOYER:** \_\_\_\_\_

Address: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Supervisor's Name and Position \_\_\_\_\_ Phone No.: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

## PERSONAL REFERENCES

Please list below the names and addresses of three persons (other than your pastor) we may contact as references. Do not include relatives or former employers.

I. **NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

Occupation: \_\_\_\_\_ Email: \_\_\_\_\_

Address (*Street, City, State*): \_\_\_\_\_

II. **NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

Occupation: \_\_\_\_\_ Email: \_\_\_\_\_

Address (*Street, City, State*): \_\_\_\_\_

III. **NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

Occupation: \_\_\_\_\_ Email: \_\_\_\_\_

Address (*Street, City, State*): \_\_\_\_\_

## CHRISTIAN EXPERIENCE

**NAME of CHURCH:** \_\_\_\_\_ Church Member?  Yes  No

Denomination: \_\_\_\_\_ Church Address: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Offices and activities in church: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## BASIC STATEMENT OF YOUR PERSONAL CHRISTIAN TESTIMONY

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## ANY OTHER INFORMATION YOU WOULD LIKE FOR US TO CONSIDER

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## ACKNOWLEDGMENT

Because of the special relationship of trust and service placed in the individuals who are called to serve for a Christian ministry, Orphan Outreach conditions employment on, among other things, the results of previous employer references, pastor references, and other general references and investigations.

I have read and completed the application carefully and certify that all information contained in this application and any attachments to it are true and complete to the best of my knowledge. I further authorize Orphan Outreach to make such investigation and inquiries of my prior employment, my qualifications and abilities, my statements in this application and any attachments to it, my criminal history/records, and any other related matters in arriving at an employment decision.

I hereby authorize my previous employers, educational institutions, and religious denominations, churches, and other organizations to provide all information that they may have concerning my past employment, education, service, membership, or affiliation. In addition, I hereby release Orphan Outreach and its officers, directors, employees, and other agents of and from any and all of potential liability arising from such investigation and inquiries of the above information and/or the completion of any criminal record check requirements.

I understand that any omission of fact or false or misleading information given in this application for employment, any attachments to it, or in my interview(s) may result in the denial of my employment, the withdrawal of my conditional offer of employment, if made, or disciplinary action, up to and including immediate discharge, as applicable. Employment is subject to job availability.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

Email your completed application, resume and cover letter to [hrmanager@orphanoutreach.org](mailto:hrmanager@orphanoutreach.org)

# ORPHAN OUTREACH

## BACKGROUND CHECK AUTHORIZATION

This document is to inform you that, as a part of our procedure for processing your employment application or otherwise determining your eligibility for a position with Orphan Outreach, criminal records, credit reports and other background checks may be obtained regarding you for employment purposes. This inquiry may, by the nature of the data collected in such records, include information as to your character, general reputation, personal characteristics and mode of living, whichever may be applicable. At the time a background check is required, you will receive a secure link via email to complete your background check.

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I, \_\_\_\_\_, hereby consent to and authorize Orphan Outreach to obtain one or more consumer/investigative reports on me in connection with my application for employment. Such reports may include, but are not limited to, information regarding my criminal record, driving record, credit, employment history and performance, or other investigative reports. I understand that the agencies from which this report or reports may be sought may include, without limitation, criminal records search agencies, consumer information/credit bureaus, and the like. I also understand that this authorization, in original or copy form, shall be valid for this and any future reports or updates that may be requested in connection with my employment at Orphan Outreach.

I acknowledge that I read the information contained on this form carefully and certify that all of the information completed by me and as contained in my application for employment with Orphan Outreach (and any attachments to it) were and are true and complete to the best of my knowledge. I also hereby release Orphan Outreach and its officers, directors, trustees, employees and other agents, and all other persons, companies, schools, consumer information agencies, record search firms and other entities, of and from any and all potential liability arising from inquiries by Orphan Outreach and its agents regarding the above background checks and/or the compilation or use of such reports regarding me.

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**Signature**

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**Date**

Sign and email to [hrmanager@orphanoutreach.org](mailto:hrmanager@orphanoutreach.org)