



Application for Employment for Keepers of the Flame

Date:

Position:

Applicant Full Name	
Mailing Address	
City/State/Zip	
E-mail address if available	
Phone no. where you can be contacted	
Best time to contact you	
Date you joined the K.O.F. Fraternity	
Social Security Number	
Hours of work desired?	<input type="checkbox"/> Full-time <input type="checkbox"/> 30 hrs <input type="checkbox"/> 20 hrs
Are you legally eligible for employment in this country?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been convicted of a crime in the last 7 years? (A conviction will not automatically bar employment)	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:

Please provide the following information about any previous employment starting with your most recent position. You may attach a resume as supplementary information.

Employer	
Address	
Dates employed	
Position and pay rate	
Reason for leaving	

Employer	
Address	
Dates employed	
Position and pay rate	
Reason for leaving	

Employer	
Address	
Dates employed	
Position and pay rate	
Reason for leaving	

Employer	
Address	
Dates employed	
Position and pay rate	
Reason for leaving	

Employer	
Address	
Dates employed	
Position and pay rate	
Reason for leaving	

Educational History

List school name and location, years completed, course of study, and any degrees earned:

High School: _____

College: _____

Technical training: _____

Other: _____

List any special accomplishments, awards, volunteer work etc. (exclude memberships that would reveal race, color, sex, national origin, age or any other similarly protected status).

Please tell us why you would like to work on staff at the Inner Retreat:

List any skills and/or work experience you would bring to this position including job related training, work experience on special assignments, licenses or certificates.

If applicable, describe any additional training you may need to be successful in this job.

When would you be available to start work? _____

PERSONAL REFERENCES

List the name and telephone number of three people who know you well whom we may contact as references. You may include references from school or other personal references.

Name	Telephone	Number of years known
	()	
	()	
	()	

Applicant Statement:

I hereby authorize The Summit Lighthouse/Church Universal and Triumphant to contact previous employers, educational institutions, and personal references to verify the accuracy of information I have provided in this application and to obtain further information. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and release all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

As an applicant for employment at the Inner Retreat I hereby understand that while living and working at the Inner Retreat I will be expected to conform to and abide by the rules, regulations and procedures outlined in the Employee Handbook.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: _____ Date: _____

Send completed forms and references by :

Mail:
The Summit Lighthouse
Attn: Human Resources
63 Summit Way
Gardiner, MT 59030-9314

Fax: (406) 848-9291
Email: HRInfo@tsl.org