

**Martin Luther Camp Corporation- Koinonia**

**165 Lakeview Drive  
Highland Lake, NY 12743**

**APPLICATION FOR EMPLOYMENT**

Date of Application \_\_\_\_\_

**PERSONAL DATA:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Social Security # \_\_\_\_\_ (Used to run a National Criminal Background Check required for employment)

Date of Birth \_\_\_\_\_

**Present Address:**

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

**Permanent Address:**

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

When will you be available for placement? \_\_\_\_\_

Are you at least 18 years of age? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you legally eligible for employment in the US? \_\_\_\_\_ Yes \_\_\_\_\_ No

**EDUCATION:**

Name of School	Location	Diploma or Degree Granted	Major and Minor
High School			
College			
Graduate Work			

**GENERAL:**

List any special awards, certificates or licenses issued to you:

\_\_\_\_\_

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**EMPLOYMENT (List in numeric order) :**

Company or District \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_ Position Held \_\_\_\_\_ Salary Range \_\_\_\_\_

Description of Duties \_\_\_\_\_

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Company or District \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_ Position Held \_\_\_\_\_ Salary Range \_\_\_\_\_

Description of Duties \_\_\_\_\_

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**If additional space is required, please attach additional pages as necessary.**

**REFERENCES:** Give at least 3 references who have first hand knowledge of your personal and professional competence. Do not include names of relatives.

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Nature and Length of Relationship</u>

It is the policy of Koinonia not to discriminate on the basis of sex, race, national origin, or disability in its educational programs, activities, or employment policies as required by Title IX of the Education Amendments, Section 504 of Rehabilitation Act, Title VII, and the Americans with Disabilities Act.

**AFFIRMATION** – To be filled out by all applicants:

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information is grounds for a refusal to hire or, if hired, dismissal. I authorize any of the persons or organizations referenced in this application to give Koinonia any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application and release all such parties from all liability for any damage that may result from furnishing such information to you. I authorize you to request and receive such information.

Date \_\_\_\_\_ Signature \_\_\_\_\_

**NOTE: APPLICANT SHOULD NOT WRITE IN THE SPACE BELOW.**

Interviewed by:

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_