

# APPLICATION FOR EMPLOYMENT HOLY CROSS LUTHERAN CHURCH AND SCHOOL



Thank you for your interest in employment at Holy Cross Lutheran Church and School.

If because of a disability, you are in need of any special assistance with this application form or the application or interview process, please inform the Business Manager so that appropriate accommodations may be made.

We are an Equal Opportunity Employer. Holy Cross Lutheran Church and School does not discriminate in the employment of individuals on the basis of race, color, national or ethnic origin, disability, gender or age. Because we are a church body, The Lutheran Church—Missouri Synod retains the right to give preference in hiring to persons who are members in good standing of an LCMS congregation.

## PERSONAL DATA

Name: \_\_\_\_\_  
*Last, First Middle*

Present Address: \_\_\_\_\_  
*Street Address City, State, Zip Code*

Previous Address: \_\_\_\_\_  
*Street Address City, State, Zip Code*

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_ Congregation: \_\_\_\_\_

Are you 18 year old or older? Yes No Pastor's Name: \_\_\_\_\_

## Work Preference

Type of work/position desired: \_\_\_\_\_ Referred by: \_\_\_\_\_

Interested in: Full Time Part-Time Seasonal

Salary required: \_\_\_\_\_ Date available to begin: \_\_\_\_\_

Are you able to meet the attendance requirements of the position? Yes No

Will you work overtime, if required? Yes No

If no, please explain why: \_\_\_\_\_

## OTHER

Should you be employed by Holy Cross, would you engage in any other business? Yes No

If yes, where and in what capacity? \_\_\_\_\_

Are you a citizen of the United States, or do you have a valid authorization to work in the United States? Yes No

Have you ever been convicted, or plead guilty or "no contest" to any crime, other than traffic violations? Yes No

If yes, please explain: \_\_\_\_\_

Answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever been discharged or asked to resign by a previous employer? Yes No

If yes, please explain: \_\_\_\_\_

### PERSONAL REFERENCES

Name	Phone Number	Business/Profession	Length of Acquaintance
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

### EMPLOYMENT HISTORY

List your complete employment record including temporary, regular and part-time in date order with **most recent first**. List military service, if applicable, as part of your employment record. Attach additional pages, if necessary.

#### MOST RECENT EMPLOYER

Are you currently working for this employer? Yes No Full-time  
If yes, may we contact? Yes No Part-time

Company name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address City, State, Zip Code*

Supervisor's Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Employment Start Date: \_\_\_\_\_

Brief job description: \_\_\_\_\_

If you were employed under a different name, give that name in full: \_\_\_\_\_

Company name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address City, State, Zip Code*

Supervisor's Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Employment Start Date: \_\_\_\_\_ Starting Wage/Salary: \_\_\_\_\_ Ending Wage/Salary: \_\_\_\_\_

Brief job description: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

If you were employed under a different name, give that name in full: \_\_\_\_\_

Company name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address City, State, Zip Code*

Supervisor's Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Employment Start Date: \_\_\_\_\_

Brief job description: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

If you were employed under a different name, give that name in full: \_\_\_\_\_

### UNEMPLOYMENT

Account for all periods of two weeks or more for which you have been without work in the last five years.

FROM		TO		REASON
Month	Year	Month	Year	

### EDUCATION

School Name/Address	Years Attended	Graduation Date	Diploma/Degree	Major Subject	GPA
High School: Address:					
School: Address:					
School: Address:					

# ***Acknowledgment of Understanding and Consent***

## **PLEASE READ BEFORE SIGNING**

**If you have any questions regarding this statement, please ask them of an employment interviewer before signing.**

This organization does not discriminate in hiring or employment on the basis of race, color, national origin, sex, age or disability, except with respect to positions that fall within the ministerial exception. Because we are a church body, The Lutheran Church–Missouri Synod retains the right to give preference in hiring to persons who are members in good standing of an LCMS congregation.

It is understood that this application is not an obligation to provide employment. The application will be kept active for three months and it must be renewed to be active for a longer period.

I hereby certify that the statements made in this employment application are true and complete, to the best of my knowledge, and I authorize investigation of those statements. I understand that falsification, misrepresentation or omission of facts will be sufficient cause for elimination of any consideration for employment or cause for dismissal from the Synod, if I have been employed.

Holy Cross has the right, exercisable at any time, and without notice, to change wages, to change or eliminate benefits and policies, as well as to terminate, with or without cause, the employment relationship. I understand that no representative of Holy Cross, other than the Business Manager, has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing.

I understand that all employees of Holy Cross are expected to respect the official doctrines of the Synod and to pursue lifestyles that are morally in harmony with its teachings.

I agree that I have read and understand the above acknowledgments and agreements and recognize all of the above as conditions of employment.

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

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

# Ministry Covenant

## HOLY CROSS EVANGELICAL LUTHERAN CHURCH

**1. Jesus' call to live as His disciples.** "It is by grace you have been saved, through faith – and this is not from yourselves, it is the gift of God." (Ephesians 2:8) Jesus reminds us, as His faith-filled disciples, "You are the light of the world...let your light shine before others, that they may see your good deeds and praise your Father in heaven." (Matthew 5:14-15) Inspired by God, the Apostle Paul wrote, "For Christ's love compels us... that those who live should no longer live for themselves but for Him who died for them." (2 Corinthians 5:14-15) Therefore, in response to God's love for us and out of love for our neighbors, we willingly and joyfully commit to the following Ministry Covenant.

**Covenant Inclusions.** The Holy Cross Ministry Covenant is rooted in sincerely held religious beliefs and is consistent with the following:

- a. The Ten Commandments (Exodus 20:2-17)
- b. The Great Commandments as stated by Jesus Christ (Matt. 22:37-40)

**2. Personal Conduct.** Persons officially connected with the Holy Cross community, including called and non-called workers, elected officers and commissioners, and any volunteer in a spiritually influential position (e.g. Sunday School Teacher, Bible Study leader, etc.) shall hereinafter be referred to as ministry community members. All such ministry community members must conduct their personal affairs so there can be no opportunity for unfavorable reflections upon the Christian beliefs and mission of the ministry of Holy Cross Lutheran Church and School, either expressed or implied. The use of common sense, good ethical standards and discretion will guide all who are called into community with the ministry in proper conduct. Failure to maintain reasonable standards is subject to discipline, up to and including termination, from the ministry community. It is expected that all members of our ministry community will conduct themselves in a manner consistent with biblical standards, values, and character.

**3. Rules of Conduct.** The Ministry Covenant has been formed to establish acceptable standards of conduct, assure fair treatment of all members of the community, enhance the smooth operation of the organization, and honor our Creator while reflecting His love to the world around us. Ministry community members are expected to become familiar with and abide by the standards outlined in this covenant. The purpose of these rules is to maintain a community environment that protects the safety and dignity of each community member without placing unreasonable restrictions on anyone.

Ministry community members are expected to model biblically appropriate behavior and conduct both on and off-campus, to include their digital and social media presence, and model relationships that demonstrate a growing Christ-likeness manifested in a lifestyle that serves and gives itself to reconcile others. Ministry community members are also expected to model appropriate language on and off-campus and model speech that demonstrates a growing Christ-likeness (Ephesians 5:4). Ministry community members shall maintain appropriate attitudes of concern for others. Problems concerning ministry community members' roles, relationships, and professional conduct should first be handled directly with the person involved. If a satisfactory resolution cannot be concluded, the matter should move up the relevant chain of responsibility. Specifically, ministry community members shall respect the integrity and confidences of other community members and those outside of our community attending any of our ministry's functions. Ministry community members are expected to operate within their respective roles.

In summary, Christian ethics demand that ministry community members act in love and integrity, in confidentiality, and in alignment with the mission/purpose of Holy Cross Lutheran Church and School.

**4. Inappropriate Conduct.** Violation of ministry rules and policies may result in oral discipline, written/documentated discipline, and/or termination of a member's role in the ministry community. There is no requirement that discipline be progressive or that a warning be given prior to demotion or any other disciplinary action, including discharge from the ministry community. Discipline will be dealt with in accordance to the HCLC organizational structure. Set forth below are some examples of misconduct which will not be tolerated by Holy Cross while a ministry community member maintains their role. This list is not exhaustive and examples are not listed in order of seriousness.

- a. Falsification of personnel and/or student records and information or other ministry records.
- b. Dating, or otherwise becoming romantically involved with, anyone under legal age.
- c. Engaging in any activity which a ministry community member knows, or has reason to know, will adversely affect the mission of the ministry.
- d. Deliberate damage or destruction of any ministry property or the property of any ministry community member.
- e. Engaging in criminal conduct.
- f. Using abusive language at any time during ministry duties.
- g. Wearing unprofessional or inappropriate styles of dress (including dressing in such a way as to willfully reject one's sex assigned at birth (Gen. 1:27)).
- h. Violation of any safety, health, security or ministry policies, rules or procedures.
- i. Committing a fraudulent act or a breach of trust under any circumstances.
- j. Unlawful harassment including harassment of a sexual nature (with the understanding that Holy Cross reserves the right to operate according to its sincerely held religious beliefs about biblical marriage and sexuality and therefore does not define "harassment" as including any enforcement of, or adherence to, its biblical principles and expectations in the areas of marriage, sexuality, dress, and discipline).
- k. Engaging in behavior that suggests a willful violation of the religious beliefs and practices of the ministry including engaging in sexual acts and/or relationships outside the confines of biblical marriage between one man and one woman and rejection of one's sex assigned by God at birth.

If a ministry community member has any doubt about whether certain conduct will constitute behavior that suggests a willful violation of the religious beliefs and practices of the ministry, the community member should ask an appropriate ministry leader.

By signing below, the ministry community member acknowledges an understanding that Holy Cross only hires staff members and/or approves volunteers who agree with its sincerely held religious beliefs and agree to abide by its Ministry Covenant which is rooted in its beliefs and which Holy Cross believes reflects a relationship representative of a walk with Christ.

In addition, by signing below, the ministry community member acknowledges having read, understood, and agreed to abide by this Christian Ministry Covenant and that Holy Cross reserves the right to discipline said community member (up to and including termination from the community) for any action(s) in violation of this Ministry Covenant.

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Ministry Community Member printed name

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Signature

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Date



RELEASE AND AUTHORIZATION

In connection with my application for employment or volunteer service, I understand that you may be requesting information concerning my motor vehicle operation history, credit history and criminal history from various state, nation and public sources, including Central Registries for Child Abuse and other public records available.

I HEREBY AUTHORIZE, WITHOUT RESERVATION, ANY LAW ENFORCEMENT AGENCY, STATE OR FEDERAL AGENCY, ADMINISTRATOR, INSTITUTION, INFORMATION SERVICE BUREAU OR EMPLOYER TO FURNISH ANY AGENT OF HOLY CROSS LUTHERAN CHURCH AND SCHOOL THE ABOVE INFORMATION.

I further acknowledge that a telephonic facsimile (FAX) or photographic copy shall be as valid as the original. My signature acknowledges that I have been given the opportunity to make a copy of this release for my records.

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

The following must be filled out completely for your application to be considered. Please *print legibly*.

**Do not leave any space blank.**

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

Maiden Name \_\_\_\_\_ *(list N/A if not applicable)*

Married names, nicknames or other names used: *(list "None" if none apply)*

\_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_

Social Security # \_\_\_\_\_ Gender: \_\_\_\_\_

Current Address:

\_\_\_\_\_  
Street City, State Zip Code