



## **Open Arms Lutheran Church & Daycare**

7865 Belleville Rd.

Belleville, MI 48111

(734)699-5000

[www.openarmscenter.com](http://www.openarmscenter.com)

### **Application for Employment**

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*Print all information – Attach additional sheets if necessary*

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Positions applying for: \_\_\_\_\_  
\_\_\_\_\_

**We are an equal opportunity employer. It is the policy of this organization not to discriminate on the basis of race, sex, national origin, marital status, age, weight, height, color or handicap in the hiring, promotion, payment, or disciplining of employees.**

If you are a person with a disability, you may request any reasonable accommodation to participate in the application process or interview process. This request should be made in advance so that we can make an accommodation.

**Personal Information**

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- Mr.
- Ms.

\_\_\_\_\_

Last First Middle Initial

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Number and Street

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City State Zip Code

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Telephone: Home Other

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Email Address

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Have you previously worked at Open Arms?

- Yes
- No If no, do you have legal authority to be employed in the U.S.?
  - Yes
  - No

\_\_\_\_\_

Visa type Immigrant Number Date granted

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Are you under age 16?

- Yes
- No

Have you ever been convicted of a felony?

- Yes
- No

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

How did you learn of this opportunity? (Check all that apply)

- Employee Referral
- Walk-in
- Open Arms Website
- Newspaper
- Other – Specify: \_\_\_\_\_

Have you ever been administratively determined by a federal, state, or local governmental agency to have committed child abuse or child neglect?

- Yes
- No

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

Are you on a court supervised probation or parole?

- Yes
- No

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

**Job Information**

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Are you available?

- Full-time
- Part-time (number of hours/days available each week: \_\_\_\_\_)
- Temporary

List any skills or qualifications you have that are related to the job(s) for which you are applying.

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List any office machines, computer software/hardware, or equipment in which you are trained or have experience.

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List any certifications or licenses - including driver's license - which you have that are related to the job(s) for which you are applying.

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Are you able to perform the essential functions of the job(s) for which you are applying?

- Yes
- No

If no, please describe: \_\_\_\_\_

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**Education**

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Circle highest level of education completed:

1 2 3 4 5 6 7 8 9 10 11 12 GED

**Undergraduate:**

1 2 3 4

**Graduate:**

1 2 3 4

Name of school	City and State	Graduation date	Major, Degree or Course

## Employment History

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Please provide the following information regarding your past three employers, with your present or most recent employer first. Include Armed Forces and/or unpaid volunteer experience.

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Employer

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Street

City

State

Zip Code

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Supervisor

Phone

May we contact?

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Dates (from/to)

Hourly Rate/Salary

---

Reason for leaving

---

Job title

---

Job duties

---

---

---

Employer

---

Street

City

State

Zip Code

---

Supervisor

Phone

May we contact?

---

Dates (from/to)

Hourly Rate/Salary

---

Reason for leaving

---

Job title

---

Job duties

---

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## Employment History (continued)

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Employer

---

Street

City

State

Zip Code

---

Supervisor

Phone

May we contact?

---

Dates (from/to)

Hourly Rate/Salary

---

Reason for leaving

---

Job title

---

Job duties

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## Personal References

*Please provide the contact information for three individuals who can attest to your good character.*

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**Name**

Phone

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Street

City

State

Zip Code

---

**Name**

Phone

---

Street

City

State

Zip Code

---

**Name**

Phone

---

Street

City

State

Zip Code

## Professional References

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Please provide the contact information for three past supervisors or coworkers.

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<b>Name</b>		<b>Phone</b>	
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Street	City	State	Zip Code
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<b>Name</b>		<b>Phone</b>	
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Street	City	State	Zip Code
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<b>Name</b>		<b>Phone</b>	
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Street			
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## Spiritual History

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*Open Arms is a Christian organization, and desires all employees to fully partner with us in sharing the Gospel of Jesus Christ with our customers. These questions help us to assess your spiritual strengths and potential growth areas, but will not be used solely to make an employment decision.*

Please describe how you see your current relationship with Jesus Christ.

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Please list any churches where you have been a member or regular attendee in the last five years.

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Congregation Name	City	State	Phone
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Congregation Name	City	State	Phone
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Please briefly describe any specific ministry areas where you have served or feel gifted while at your congregations.

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Please briefly describe any previous experience you have had in Christian children's ministry.

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Please describe what people or experiences have been most significant in your growth as a Christian.

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Please describe what you have identified as spiritual gifts. Describe how you will use them while at Open Arms.

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## Notices and Signature

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I hereby give consent for Open Arms Lutheran Church & Daycare to contact the above employers, references and educational institutions to verify the items listed above. I hereby release Open Arms Lutheran Church and Daycare and the above referenced organizations, referenced persons and employers from all claims, liability and damages that may result from furnishing the information to you. I expressly and fully waive all written notice from all prior employers. I also understand that because of the nature of this position and licensing requirements, I hereby consent to the release of this application or portions of this application to representatives of Department of Consumer and Industry Services or other government agencies.

I further specifically waive written notice and agree to the divulging of any disciplinary reports, letters of reprimand or other disciplinary action by all prior employers and hereby release my prior employers from all claims, liability and damage that my result from furnishing the information to you.

I certify that all statements on this application are true and complete to the best of my knowledge and belief. I understand that any falsification of this application may be considered sufficient cause for rejection of my application or termination if I am employed. I understand and agree that if employed, my employment will be for no definite period and may be terminated at any time.

### Licensing Requirements for Criminal History Verification

In accordance of Public Act 116, childcare centers are required to perform a criminal background check using Michigan State Police's internet criminal history tool (ICHAT). A separate form must be completed, providing the necessary information and a background check completed, prior to an offer of employment being made.

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Signature

Date

***Note: All submitted applications are considered as positions become available. Applications will be kept on file for a period of six months after submission.***

# State of Michigan Background Check

I, \_\_\_\_\_, in regards to my employment/volunteering/mission work with Open Arms Lutheran Church and Child Care (hereafter referred to as "Open Arms") allow Open Arms to verify information given to him or her on my application/paperwork for employment/volunteerism/ mission work and do hereby release Open Arms, Michigan State Police and their assigns or successors from all liability or claims and authorize the Michigan State Police to release to Open Arms my conviction criminal history information.

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Driver's License #** \_\_\_\_\_

**State of issuance:** \_\_\_\_\_

**D.O.B** \_\_\_\_\_

**Sex** \_\_\_\_\_

**Race** \_\_\_\_\_

**Have you lived in a state other than MICHIGAN in the past year? YES NO**

*(If yes, please note below which states you have lived in)* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Open Arms agrees to use the information from the Department of State Police to verify information on my application for employment/volunteerism/mission work, as well as statements I have made in regard to my employment/volunteerism/mission work and for any determination into my good moral character. Open Arms further agrees that this information will not be released without my written permission unless it is authorized by law to release this information.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE