

# Custodial Application

Individual must be available to work evenings and weekends. Applicants must return the application in to the Church (1400 W. Washington Center Rd.) No phone calls will be accepted—we will contact applicants.

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

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

State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Best time to reach you: \_\_\_\_\_

E-mail: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender (Circle one): M F

List last three employers:

1. \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Can we contact them (Circle one): Y N

2. \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Can we contact them (Circle one): Y N

3. \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Can we contact them (Circle one): Y N

References:

1. \_\_\_\_\_ Phone: \_\_\_\_\_

2. \_\_\_\_\_ Phone: \_\_\_\_\_

3. \_\_\_\_\_ Phone: \_\_\_\_\_

Any Work Restriction (Please List): \_\_\_\_\_

\_\_\_\_\_