

**Teen Challenge, Inc.
Brooklyn, New York**

Employment Application

The information requested in this application is vital to the consideration of you as an employee of Teen Challenge. By following the instructions below, you can ensure yourself a fair evaluation and avoid unnecessary errors and delays in the processing of your application.

1. Read each question and the instructions carefully before answering.
2. Answer all questions. If a question does not apply to you, mark it "N/A" (Not Applicable).
3. Make your answers as complete as possible. If you do not have sufficient space to complete an item satisfactorily, attach additional pages. Please reference additional pages according to the respective item.
4. Check the names, addresses, and phone numbers of your references for accuracy. Address should be complete to include zip codes.
5. Unless otherwise specified, please type or hand-print all responses. Clarity and legibility is important for proper understanding of your application.

Note: This application is used for employment in all departments of Teen Challenge in Brooklyn, New York. There is additional information requested for those applying for certain positions. It will be indicated if there are additional sections you are to complete. Depending upon the promptness of responses from your references, Teen Challenge will attempt to reply to your application within one to four weeks.

Selection of staff members is based on standards required by the job description of the job under consideration.

Teen Challenge, Brooklyn, New York does not discriminate in hiring practices on the basis of age, race, sex, or national origin.

Please mail or fax application to:

**Mary Kitchen, Administrator
Teen Challenge, Inc.
444 Clinton Avenue
Brooklyn, New York 11238
Phone: (718) 789-1414 Ext. 206
Fax: (718) 789-1439
Email: maryk@TeenChallengeBrooklyn.com**

Teen Challenge, Inc.
444 Clinton Avenue
Brooklyn, New York 11238
Phone: (718) 789-1414
Fax: (718) 789-1439

**Application
For Employment/Volunteer**

Date: _____

PERSONAL INFORMATION

Name (Last, First, M.I.)

Present Street Address City State Zip Code

Permanent Street Address City State Zip Code

Phone Number Referred by E-mail address

EMPLOYMENT DESIRED

Position Date you can start Salary Desired

Are you employed? Yes No If yes, may we inquire of your present employer? Yes No

Ever applied to TC before? Yes No Where? When?

EDUCATION

	Name and Location	Years Attended	Did You Graduate?	Subjects Studied
Grammar School	_____ _____ _____			
High School	_____ _____ _____			
College	_____ _____ _____			
Trade, Tech, or Business School	_____ _____ _____			

GENERAL

Subjects of special study/research work; special training/skills

Branch and dates of U.S. Military or Naval Service Rank

FORMER EMPLOYERS

List below the last four employers, starting with the last one first:

From Date/Year To Date/Year	Name and Address of Employer	Phone	Salary	Position	Reason for leaving
From: To:	<hr/> <hr/>				
From: To:	<hr/> <hr/>				
From: To:	<hr/> <hr/>				
From: To:	<hr/> <hr/>				

REFERENCES

Name	Address	Phone	Business	Years Known
	<hr/>			
	<hr/>			
	<hr/>			

Legal

1. Have you ever been arrested and convicted of any crime? Yes No
2. Have you ever been arrested and convicted for any sexual misconduct? Yes No
3. Have you ever been arrested and convicted for any child-abuse related crime? Yes No
4. Are you currently on probation or parole? Yes No

AUTHORIZATION

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release TC, all employees, and references from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of TC 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, unless it is in writing and signed by an authorized TC representative. I authorize all previous employers and supervisors, including all persons with and for I have worked, to give the representatives of Teen Challenge any and all information regarding me and my previous employment. I release Teen Challenge and all previous employers and supervisors from liability for any damages that may result from furnishing this information to Teen Challenge, Inc.

Date _____ Signature _____

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Teen Challenge
Brooklyn, New York

Supplemental Employment Application

Please read entire section before beginning to fill it out. Please print clearly.

Teen Challenge is a Christian ministry serving people that find themselves bound by life-controlling addictions. We take advantage of every opportunity to prevent the occurrence of such dysfunctional situations. Every member of the Teen Challenge staff is considered an essential contribution to our mission, and therefore, all staff are considered ministers and missionaries. As such, we require some further information in order to consider your application for employment.

1. What area of ministry do you believe God is leading you to now and in the future?

2. List the skills and abilities you believe you presently have to minister with.

3. List the skills you feel you will be needing to develop.

4. List any languages other than English that you speak, read, and write.

5. Country of Citizenship _____

If you are not a US Citizen, do you have a green card? _____

6. Marital Status Married Single Divorced Other _____

7. Why do you want to work at Teen Challenge?

8. Have you been under a doctor's care in the last year? Yes No
If yes, please explain:

9. Do you require regular medical attention or take any medications presently?
Yes No If yes, please explain:

10. Do you have any disabilities or physical restrictions? Yes No
If yes, please explain:

11. Do you have any history of heart disease, blood pressure, or psychological or emotional conditions? Yes No If yes, please explain:

12. How long have you been a Christian? _____
13. Do you have a driver's license? Yes No If yes, how long? _____
State _____ Classification _____ .
14. Do you have a home church? Yes No If not, why? _____

If yes, what is the name of the church? _____
Address _____
Pastor's Name _____ Phone Number _____
15. Using a separate sheet of paper, please state your beliefs/feelings regarding the following:
- | | |
|---|------------------------|
| a. Homosexuality | g. HIV/AIDS |
| b. Baptism of the Holy Spirit | h. Speaking in tongues |
| c. Fruit of the Spirit | i. Spiritual gifts |
| d. Spiritual warfare | j. Counseling |
| e. Binding and loosing of spirits | k. Discipleship |
| f. Demon possession and oppression
(specifically, can a Christian be demon possessed?) | |

SKILL INVENTORY

Name _____

*Please rate your skill level
in the following categories:*

	No Skill	Some Skill	Intermediate Skill	Advanced Skill	Expert Skill
Barbering/Hairstyling	1	2	3	4	5
Cooking	1	2	3	4	5
Music - Instrument	1	2	3	4	5
Music - Voice	1	2	3	4	5
Music - Choir Director	1	2	3	4	5
Painting - Artistic	1	2	3	4	5
Photography	1	2	3	4	5
Sewing	1	2	3	4	5
Auto Body	1	2	3	4	5
Auto Mechanic	1	2	3	4	5
Electrical - Wiring/Repair	1	2	3	4	5
Furniture Refinishing	1	2	3	4	5
Landscaping	1	2	3	4	5
Electric Motors Maintenance/Repair	1	2	3	4	5
Large Appliance Maintenance/Repair	1	2	3	4	5
Small Appliance Maintenance/Repair	1	2	3	4	5
Masonry	1	2	3	4	5
House Painting	1	2	3	4	5
Plumbing	1	2	3	4	5
Boiler Maintenance/Repair	1	2	3	4	5
Carpet Laying	1	2	3	4	5
Sheet Rocking/Dry Walling	1	2	3	4	5
Welding	1	2	3	4	5
Carpentry	1	2	3	4	5
Projector Set-up/Operation	1	2	3	4	5
Sound System Set-up/Operation	1	2	3	4	5
Video Camera Set-up/Operation	1	2	3	4	5
First Aid/Emergency Medical	1	2	3	4	5
GED Instructor/Tutor	1	2	3	4	5
Literacy Instructor	1	2	3	4	5
Computer - Word Processing	1	2	3	4	5
Computer - Data Bases	1	2	3	4	5
Computer - Systems Maintenance	1	2	3	4	5
Computer - Desk Top Publishing	1	2	3	4	5
Graphic Design	1	2	3	4	5
Paste-up/Lay Out	1	2	3	4	5
Typing (Speed: _____ wpm)	1	2	3	4	5
Filing	1	2	3	4	5
Copy Machine Operation	1	2	3	4	5
Reception	1	2	3	4	5
Other:					
_____	1	2	3	4	5
_____	1	2	3	4	5
_____	1	2	3	4	5
_____	1	2	3	4	5

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