

STAFF

A P P L I C A T I O N



Type or print legibly in ink. The application must be completed in full. We will not accept "see resume." All statements subject to verification. Keep a copy of your completed application and attachments as they will not be returned. This application and all accompanying material will be retained for one year.

Spirit of Faith Bible Institute Staff Application Form



Position Applied for: Date:

Date Available: Date of Birth:
(month / day / year)

Name:
Last First Middle

Mailing Address:

City State Zip Code County Country

Telephone: Home Mobile: Work:

E-mail Address

Emergency Contact: Relationship

Address (if different)

City State Zip Code County Country

Telephone: Home Mobile: Work:

E-mail Address

1. Are you a member of SOFCC? Yes No
2. Have you completed the following:
 - a. Perfecting Class Yes No If yes, give year:
 - b. Disciples of Christ Yes No If yes, give year:
 - c. Ministers Internship Program Yes No If yes, give year:

3. List ALL Ministry of Helps areas in which you have served (past and present):

1. 2. 3.
 4. 5. 6.

4. Educational Summary

School/ College/University City/State	Attendance/Dates (MM/YY)	Major	Degree/ Certificate	Completion Date (MM/YY)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

5. Professional Experience: Please attach current resume or curriculum vitae (CV).

6. Please list all relevant experience with regards to the position in which you are applying for:

I affirm that the information I have provided on this application form and all other application materials is complete, accurate and true to the best of my knowledge.

Signature

Date

Official Use Only

Date Received

By

(Signature of Receiver)

Status: Approved Rejected Future Consideration

Notification to Applicant

(Date in which letter was sent to the applicant)