



APPLICATION FOR EMPLOYMENT

San Diego Rescue Mission is an equal opportunity employer.
PLEASE PRINT. COMPLETE ALL INFORMATION, regardless of any additional information attached.

PERSONAL INFORMATION

Position(s) Applied For	Salary/Rate Desired	Date of Application
I am available for: (check all the apply) <input type="checkbox"/> Full-time <input type="checkbox"/> Temporary <input type="checkbox"/> Days <input type="checkbox"/> Overnights <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal <input type="checkbox"/> Afternoons <input type="checkbox"/> Weekends <input type="checkbox"/> On-call <input type="checkbox"/> Evenings		

Last Name	First Name	Middle Name	
Street Address		City	State
		Zip Code	
Home Telephone	Cell Phone	Work Phone	Email
Alternate Phone	Other Name(s) under which employed		

REFERRAL SOURCE (Please check all that apply)

<input type="checkbox"/> Employee Referral (provide employee's name) _____ <input type="checkbox"/> Printed Advertisement (specify publication) _____	<input type="checkbox"/> SDRM Website <input type="checkbox"/> Church <input type="checkbox"/> Phone Inquiry <input type="checkbox"/> Friend/Relative <input type="checkbox"/> Former Employee <input type="checkbox"/> Walk-in	<input type="checkbox"/> Church (specify name) _____ <input type="checkbox"/> School (specify name) _____ <input type="checkbox"/> Other (specify source) _____
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EDUCATION

	High School	Undergraduate College / University	Graduate / Professional
School Name And Location			
Years Completed	9 10 11 12	1 2 3 4	1 2 3 4
Diploma / Degree			
Describe Course of Study			
Other Coursework			

PROFESSIONAL LICENSES / CERTIFICATIONS

Type	State	Number	Expiration Date

SKILLS AND QUALIFICATIONS

Briefly summarize the knowledge, skills and abilities you possess that qualify you for the position for which you are applying:

List computer proficiencies: _____

List specialized training you have successfully completed that pertain to the position for which you are applying: _____

List office equipment that you are capable of operating: _____

List industrial equipment/machines you are capable of operating (only if applicable to position for which you are applying):

List language proficiencies: _____

FOR DRIVING JOBS ONLY or FOR POSITIONS THAT REQUIRE DRIVING:

Do you have a valid **California** Driver's License? Yes No

Driver's License Number: _____ Class: _____ State: _____ Expiration Date: _____

EMPLOYMENT HISTORY

Start with your present or last employer. Please account for all periods of time including military service, school, unemployment and volunteer experience. **A resume may be attached as a supplement but not as a substitute.**

#1

Employer		Dates Employed		Job Duties
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving				
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain)				

#2

Employer		Dates Employed		Job Duties
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving				
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain)				

#3

Employer		Dates Employed		Job Duties
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving				
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain)				

EMPLOYMENT HISTORY (continued)

#4

Employer		Dates Employed		Job Duties
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving				
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain)				

#5

Employer		Dates Employed		Job Duties
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving				
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain)				

#6

Employer		Dates Employed		Job Duties
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving				
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please explain)				

ADDITIONAL INFORMATION

1. Are you at least 18 years old? Yes No

1a. If no, can you furnish a work permit, if required? Yes No

2. Are you eligible for employment in the United States? Yes No

Employment is contingent on satisfactory proof of legal right to work in the United States.

3. Can you perform the essential functions of the job with or without reasonable accommodation? Yes No

5a. If no, describe the functions that cannot be performed. _____

(Note: We comply with ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

4. Is there any reason why you may not be able to attend work on a regular basis or report to work on time? Yes No

6a. If yes, please explain. _____

5. Will you work overtime if required? Yes No

6. Have you ever been bonded? Yes No

7. Have you ever applied for employment at the San Diego Rescue Mission before? Yes No

7a. If yes, give date and positions for which you applied. _____

8. Have you ever been employed at the San Diego Rescue Mission before? Yes No

8a. If yes, give employment dates and position held. _____

9. Do you have relatives employed at the San Diego Rescue Mission? Yes No

9a. If yes, give names and titles. _____

REFERENCES

Please provide the names of at least 5 business references (**not friends, relatives or co-workers**) that we may contact. All references should have specific knowledge of your work experience.

Name	Address	Contact Number	How Do You Know This Person?	How Long Have You Known This Person?
#1				
#2				
#3				
#4				

STATEMENT OF FAITH

The San Diego Rescue Mission operates in compliance with the provisions of all applicable federal and state nondiscrimination laws and regulations including, but not limited to, Titles VI and VII of the Civil Rights Act of 1964, the Age Discrimination in Employment Act of 1967, the Equal Pay Act, the Americans with Disabilities Act of 1990 and any applicable sections of the California Labor Code.

However, as a private, Christ-centered, Bible-believing, nonprofit, religious organization, the San Diego Rescue Mission reserves the right to exercise preference on the basis of religion in all of its employment decisions.

The San Diego Rescue Mission is a religious, charitable, educational, social service, and rehabilitation organization.

Our mission Statement: To lovingly address the needs of men, women and children experiencing homelessness, by sharing the Good News of Salvation and providing a holistic approach to rehabilitation and recovery.

Our Vision Statement: To see God transform the lives of those experiencing homelessness, impacting San Diego one life at a time.

Our Values: Faith, Integrity, Compassion, Excellence

Our general purpose is the advancement and promotion of Christianity, both in its evangelical and its social message. Advancement and promotion are carried forward by religious and educational activities, conducting religious instruction, and by other means which extend the ministry of the Gospel of Jesus Christ. Describe why you want to work here and how you would support our Christian faith? _____

2. Describe any rescue mission or nonprofit experience (including volunteer work): _____

The San Diego Rescue Mission is a member of, and affiliated with, **Citygate the Association of Gospel Rescue Missions**, an international association of rescue missions. Membership in Citygate is limited to organizations that subscribe to the following **Statement of Faith**. As a result, any employee of the San Diego Rescue Mission must also subscribe to these principles:

1. We believe the bible to be the inspired, infallible, ultimately authoritative Word of God.
2. We believe there is one God, eternally existing as Father, Son and Holy Spirit.
3. We believe that the Lord Jesus Christ is Deity, that He was born of a virgin, that we are redeemed by His atoning death through His shed blood, that He was bodily resurrected and ascended into Heaven, and that He will come again in power and great glory.
4. We believe that men are saved through a direct, personal encounter with the risen Lord, at which time they are regenerated by the Holy Spirit. This event we hold to be an experience, rather than a doctrinal supposition.

5. We believe in the present ministry of the Holy Spirit, by whom Christ indwells each believer enabling him to live a Godly life of obedience as he reaches for maturity.
6. We believe the Holy Spirit unites all true believers in the Lord Jesus Christ and that together they form one body, the Church.

+ + +

Are you currently attending church? Yes No

If yes, what is the name of your church? _____

Denomination: _____ Pastor's Name: _____

Please describe how you came to know Jesus Christ as your personal Savior, where your relationship with Him is today and how this has resulted in your applying for a position with the San Diego Rescue Mission. List your Spiritual Gifts. Attach additional sheets, if necessary.

By signing this form, I acknowledge that:

- ***I have read, fully understand, and accept the San Diego Rescue Mission's Statement of Faith***
- ***I whole-heartedly, without mental reservation, subscribe to the religious principles and tenets expressed in the San Diego Rescue Mission's Statement of Faith***
- ***The information I provided regarding my Christian faith and experiences are true and correct***

Applicant Signature /

Printed Name /

Date

APPLICANT'S STATEMENTS

**Please read carefully the following statements before signing this application.
Only application forms that are signed and dated are considered complete and valid applications.**

I certify that the information provided on this application (including resume and any statement of faith) are correct and complete to the best of my knowledge and agree to have any of the statements checked by the San Diego Rescue Mission.

I understand that misrepresentation, falsification or intentional omission of any relevant information on this application may result in denial of my application, withdrawal of any offer of employment or, if I am hired, immediate termination of my employment. Furthermore, I authorize verification of all statements contained in this application as part of the normal process of my application for employment. I release all parties and persons from any and all liability for any damages that may result from furnishing information to the San Diego Rescue Mission. I also release the San Diego Rescue Mission from any and all damages resulting from inquiries, research, use and release of any or all information consistent with my employment application.

If employed by the San Diego Rescue Mission, I agree to conform to the rules and regulations, standards and procedures of the company, and I understand that my employment is at-will. I further understand that my employment may be terminated at any time, either by me or the San Diego Rescue Mission, with or without notice. I agree to sign all policies and procedures related to my employment and accept the terms of the employee handbook. I also understand that any offer of employment is contingent upon successful completion of a background check, drug screen, TB test and basic physical examination. I understand that if I refuse to go through the health assessment including drug screen and TB test, the offer of employment is considered non-acceptance by me and is considered canceled.

Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the San Diego Rescue Mission, I am entitled to copies of any such public records obtained by the San Diego Rescue Mission unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

APPLICANT'S SIGNATURE: _____ **DATE:** _____