

Lives Under Construction Boy's Ranch, Inc.

296 Boys Ranch Rd – Lampe Missouri, 65681, (417) 779-5374 (Fax) 779-2106

EMPLOYMENT APPLICATION

We are an Equal Opportunity Employer. We comply with Federal, State, and local laws concerning discrimination in employment. No question in this application is intended to elicit information in violation of such law nor will any information in response to any question be used in violation of any such law.

POSITION APPLYING FOR:

NAME:

Status: Single Married Widowed Divorced Remarried

D.O.B.

Height(optional)

Weight (optional)

S/S/ No.:

Phone No.

()

Street Address:

City:

State:

Zip:

How long at this address?

Children:

D.O.B.

Children:

D.O.B.

Children:

D.O.B.

Children:

D.O.B.

Children:

D.O.B.

Children:

D.O.B.

Salary Expectation: \$ /Month, in addition to utilities, food, and housing supplied by the Ranch

What present financial commitments and living requirements would you need to satisfy (above what we offer) before accepting this position?

WORK CAPACITY:

Full-time Part-time Seasonal Volunteer Other:

Projected Employment Date:

Are you willing to work overtime to finish a task or extra when needed? Yes No

Explain:

What type of commitment are you willing to make to the Ranch? Years

What would increase your commitment level?

Are you presently employed? Yes No explain:

Is there any reason not to contact your employer? Yes No explain:

Employer:

Supervisor:

Phone ()

Address:

Have you ever been discharged early Yes No explain:

Have you ever been convicted of a crime, excluding sealed records? (A conviction record does not necessarily bar employment) Yes No explain:

You will be required to fill out a criminal and background check application that you will receive via the Missouri Department of Family Services before employment.

MILITARY RECORD

What Branch of the U.S. Forces did you serve?

Date Enter:

Date Discharge:

List Special Training received:

Are you presently in the Armed reserves?

How many years?

Honorable Discharge? Yes No Explain:

EDUCATION AND TRAINING:

School	Name and Location of School	Course of Study	# Years Completed	Did you Graduate	Diploma/Degree
High School					
College/University					
Trade School					
Apprentice School					
Seminary					

List any education and credit hours, training, special skills, or certificates/licenses that you possess which is relevant to the position for which you applied:

List any machines or equipment that you are qualified and experienced in operating:

MEDICAL INFORMATION:

You need to complete the physical form before you begin employment. This form includes a general physical, HIV test, and a TB test within 30 days of employment. You may use the form from your doctor or request one from the Ranch.

In case of an accident, notify: _____ Phone: ()

List any physical limitations and explain:

Have you had any serious illness in the past 5 years Yes No explain:

Have you in the past 5 years used any alcohol, tobacco, or drugs not prescribed by a doctor? Yes No Explain:

TRANSPORTATION DATA:

Do you own your own vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No Coverage:		
Would you be willing to use your own vehicle for Ranch business (at times when needed) if you were compensated for mileage? <input type="checkbox"/> Yes <input type="checkbox"/> No		
License No. _____	State: _____	Type: <input type="checkbox"/> Operate <input type="checkbox"/> Chauffeur <input type="checkbox"/> Truck <input type="checkbox"/> Restricted <input type="checkbox"/> Passenger
Have you ever been convicted of a traffic violation? <input type="checkbox"/> Yes <input type="checkbox"/> No explain		

PERSONAL REFERENCES:	Do not include a Name of a Relative nor former Employer
Name: _____	Relationship: _____
Phone: () _____	Address: _____
City: _____	State: _____ Zip: _____
Name: _____	Relationship: _____
Phone: () _____	Address: _____
City: _____	State: _____ Zip: _____
Name: _____	Relationship: _____
Phone: () _____	Address: _____
City: _____	State: _____ Zip: _____

WORK EXPERIENCE:	LIST PRESENT EMPLOYMENT AND FORMER EMPLOYERS BEGINNING WITH THE MOST RECENT:		
FROM:	TO:	Company Name and Address	Phone No.: ()
Position held:		Supervisor and Title:	
Describe your work:			
Last Wages: \$ / _____		Reason for leaving:	
FROM:	TO:	Company Name and Address	Phone No.: ()
Position held:		Supervisor and Title:	
Describe your work:			
Last Wages: \$ / _____		Reason for leaving:	
FROM:	TO:	Company Name and Address	Phone No.: ()
Position held:		Supervisor and Title:	
Describe your work:			
Last Wages: \$ / _____		Reason for leaving:	
FROM:	TO:	Company Name and Address	Phone No.: ()
Position held:		Supervisor and Title:	
Describe your work:			
Last Wages: \$ / _____		Reason for leaving:	

FROM:	TO:	Company Name and Address	Phone No.: ()
Position held:		Supervisor and Title:	
Describe your work:			
Last Wages: \$ / _____		Reason for leaving:	
FROM:	TO:	Company Name and Address	Phone No.: ()
Position held:		Supervisor and Title:	
Describe your work:			
Last Wages: \$ / _____		Reason for leaving:	

PLEASE INDICATE YOUR SKILL IN THE FOLLOWING CATEGORIES:

<input type="checkbox"/> Cement block layer	<input type="checkbox"/> Electric organ repairman	<input type="checkbox"/> Furniture refinisher
<input type="checkbox"/> Building contractor	<input type="checkbox"/> Piano tuning & repair	<input type="checkbox"/> Furniture repair
<input type="checkbox"/> Carpentry (finish)	<input type="checkbox"/> Jack of many trades	<input type="checkbox"/> Upholstering
<input type="checkbox"/> Carpentry (rough)	<input type="checkbox"/> Backhoe operator	<input type="checkbox"/> Carpet laying
<input type="checkbox"/> Electrical (commercial)	<input type="checkbox"/> Bulldozer operator	<input type="checkbox"/> Small signs painter
<input type="checkbox"/> Electrical (simple)	<input type="checkbox"/> Tractor operator	<input type="checkbox"/> Locksmith
<input type="checkbox"/> Welder (electric)	<input type="checkbox"/> Scraper operator	<input type="checkbox"/> Typist (experienced)
<input type="checkbox"/> Welder (acetylene)	<input type="checkbox"/> Willing helper	<input type="checkbox"/> Typist (computer)
<input type="checkbox"/> Refrigeration (appliances)	<input type="checkbox"/> Supply typewriter	<input type="checkbox"/> Typist (copy)
<input type="checkbox"/> Refrigeration (commercial)	<input type="checkbox"/> Mechanic	<input type="checkbox"/> Office clerk
<input type="checkbox"/> Washer-Dryer repairman	<input type="checkbox"/> Dry wall finisher (Sheet Rock)	<input type="checkbox"/> Mailing clerk
<input type="checkbox"/> Business machines repairman	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Librarian
<input type="checkbox"/> Appliance repair	<input type="checkbox"/> Painting (interior)	<input type="checkbox"/> Tutor (grade school)
<input type="checkbox"/> Landscaping	<input type="checkbox"/> Painting (exterior)	<input type="checkbox"/> Tutor (high school)
<input type="checkbox"/> Food service experience	<input type="checkbox"/> Sewing	<input type="checkbox"/> Supply sewing machine
<input type="checkbox"/> Counseling	<input type="checkbox"/> Fund Raising	<input type="checkbox"/> Other

PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR UNDERSTANDING:

1. Why do you feel called to this ministry?
2. Normally, our staff have an 8 hour day for a 5 day work period? If needed during certain situations, would you be willing to help extra to complete a task?
3. Would you be willing to work on one of the weekend days, if you were still able to attend church?
4. Are there some areas of responsibility or work aspect that you feel you are unable or unwilling to do?
 Yes No Please explain:
5. What would hinder you from joining the Ranch as a staff?
6. What questions or comments do you have?
7. How does your spouse (if married) and/or family feel about your involvement with this ministry?
8. Please attach a picture of you and/or your family

CHRISTIAN EXPERIENCE

Briefly describe how you came to know Christ as your Savior.

How have you grown in the Lord, and what is your Christian vision or goal in your life?

STATE BRIEFLY YOUR BELIEFS ABOUT:

THE BIBLE:

JESUS CHRIST:

THE HOLY SPIRIT:

SERVANT LEADERSHIP:

Signature

Date