



Application for Employment

Personal Information

Last Name, First Name, Middle Name _____ Date _____

Address, City, State, Zip Code _____

Email Address _____ Phone Number _____

Desired Classification Full-Time Part-Time On-Call Either

How did you hear about the position? _____

Please describe what you know about Dégagé and its services

If offered a position, when are you available to start? _____

Have you ever worked for Dégagé? Yes No (If yes, please list dates and position(s) below)

Are you legally authorized to work in the United States? (You will be required to provide documentation)

Yes No

If the job you are applying for requires driving a vehicle, do you have a valid

Michigan driver's license? Yes No

Have you ever been convicted of a crime? Yes No

Are there currently any felony charges against you? Yes No

If yes, please provide date, state, and nature of the conviction (a conviction does not automatically ban you from employment)

Job(s) you are applying for _____

Please list any family members who worked or have worked for Dégagé

Please list any obtained license, registration, certification, etc., related to the position which you are applying for

Personal Information (continued)

Have you ever had a license, registration, certificate, etc. related to the position you are applying for suspended, revoked, placed on probation, or lapsed for any reason? Yes No

If yes, please explain

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? if yes, please explain

Education History

High School _____ Years Attended _____ Did you graduate? Yes No GED

College, Trade, Tech _____ Years Attended _____ Did you graduate? Yes No

College, Trade, Tech _____ Years Attended _____ Did you graduate? Yes No

College, Trade, Tech _____ Years Attended _____ Did you graduate? Yes No

Employment History

**Please start with the most recent Employer and include the last number years of employment, including periods of unemployment, including periods of unemployment. Incomplete information could disqualify you from further consideration.*

Company Name _____

Address _____ Phone Number _____

Position Held _____

Dates of Employment _____

Ending Wage _____ Ending Position _____

Name of Supervisor & Position _____

If needed, may we contact? Yes No

If yes, please provide phone number _____

Summary of Responsibilities _____

Reason for Leaving _____

Employment History (Continued)

Company Name_____

Address_____ Phone Number_____

Position Held_____

Dates of Employment_____

Ending Wage_____ Ending Position_____

Name of Supervisor & Position_____

If needed, may we contact? Yes No

If yes, please provide phone number_____

Summary of Responsibilities

Reason for Leaving_____

Employment History (Continued)

Company Name_____

Address_____ Phone Number_____

Position Held_____

Dates of Employment_____

Ending Wage_____ Ending Position_____

Name of Supervisor & Position_____

If needed, may we contact? Yes No

If yes, please provide phone number_____

Summary of Responsibilities

Reason for Leaving_____



Dégagé Ministries is an equal opportunity employer. Dégagé Ministries does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

As part of the hiring process, the following documents are also required:

- Updated Résumé
- Background Check Authorization Form
- References Form

If Dégagé Ministries desires to move forward with your application, a member of the hiring team will contact you for the above forms.

Please read the following agreements carefully before signing:

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Dégagé Ministries to hire me. If I am hired, I understand that either Dégagé Ministries or I can terminate my employment at any time and for any reason, with or without cause or without prior notice. I understand that no representative of Dégagé Ministries has the authority to make any assurance to the contrary.

Authorization to Work: *If I am selected for hire, I will be offered employment provided I verify that I am authorized to work as required by the Immigration Reform and Control Act of 1986.*

Non-Discrimination and Accommodation Requests: Dégagé Ministries abides by all federal, state, and local anti-discrimination laws, regulations, and ordinances. Dégagé Ministries provides and promotes equal employment opportunities for all applicants and employees, and it trains, promotes, compensates, and administers all employment practices without regard to any protected characteristic. Dégagé Ministries is also committed to complying with the Americans with Disabilities Act ("ADA") and any similar federal, state, or local laws or ordinances. If you believe that you have a disability and need reasonable accommodation to apply for a job Dégagé Ministries or to complete an application for employment, please notify the Business Director at lacey@deqageministries.org as soon as possible. Dégagé Ministries may ask applicants or



employees to provide documentation from the appropriate health care professional to confirm that the individual has a disability and to help assess possible reasonable accommodation, if any. Under Michigan law, requests should be made within 182 days after you become aware, or reasonably have known, the accommodation was needed.

I attest with my signature below that I have given to Dégagé Ministries true and complete information on this application. No requested information has been concealed. I authorize Dégagé Ministries to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Applicant Signature: _____ Date: _____

Thank you for your application!
Our hiring team will contact you soon.