



PO Box 84, Berrien Springs, MI 49103 Tel (269) 471-3026 Fax (269) 471-3034 Email [office@asapministries.org](mailto:office@asapministries.org)

## Application Form

Please print legibly and fill out all sections.

### Applicant Contact Information:

Full Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

### Current Address:

Number and Street \_\_\_\_\_

City \_\_\_\_\_

State & Zip \_\_\_\_\_

### Work Related Information

How did you hear about ASAP? \_\_\_\_\_

What position are you applying for? \_\_\_\_\_

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What days and hours are you available for work? \_\_\_\_\_

If hired, on what date can you start working? \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Are you available to work overtime if needed? [  ] Y or [  ] N

Salary desired: \$ \_\_\_\_\_

If hired, would you have transportation to/from work? [  ] Y or [  ] N

Are you able to perform the essential functions of the job for which you are applying, with / without reasonable accommodation? [  ] Y or [  ] N

After viewing the job description, please note the areas/functions that might be difficult to perform.

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Are you over the age of 18? (If under 18, hire is subject to verification of minimum legal age.) [  ] Y or [  ] N

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States? [  ] Y or [  ] N

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Please list the education, training you have had, including the school names, number of years completed, whether you graduated, and what degree/diploma you earned (if not already included on your resume). Please use an extra sheet of paper if needed.

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Please list the name(s) of where you worked, your supervisors' names, the phone numbers and emails, dates employed, responsibilities, and the reasons for leaving (if not already included on your resume).

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Why do you want to work for Advocates for Southeast Asians and the Persecuted (ASAP Ministries)?

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Please share either your personal testimony of how you came to know the Lord or a specific example of what you believe and how you shared that belief in the workplace. \_\_\_\_\_

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I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature \_\_\_\_\_ Date \_\_\_\_\_