



## **APPLICATION FOR EMPLOYMENT**

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Christian Health Associates is an organization that is committed to serving our community, nation, and the world in a way that glorifies and pleases the Lord Jesus Christ. Our mission is to nurture individuals and care givers through quality care, education and supportive services locally and globally. We provide services directly through our associates and by networking and collaborating with other organizations. We cultivate and develop service providers to their fullest potential in a Christian environment. We care for the whole person based on the interrelationship of the body, soul and spirit.

We operate from a Christian world view and always strive to conduct business and serve in ways that honor God and benefit others. If you are a person who would like to be a part of our dynamic and committed team, please submit your application today.

Our Association includes but is not limited to; Cornerstone Clinic, Medical and Counseling Center (Anchorage & Homer), School Based Health Centers, Alaska Medical Missions, Healthy Smiles Forever, and Anchorage Project Access.

*Applicants please type or print legibly in ink. We consider all applicants without regard to age, national origin, color, religion, sex, marital status, disability, veteran status, or any other legally protected status.*



**APPLICATION  
FOR  
EMPLOYMENT**



APPLICANT NAME: \_\_\_\_\_

**EDUCATION HISTORY**

High School Name	Address	City, State	GPA
College	Address	City, State	GPA
Trade School / Other	Address	City, State	GPA

List any special training or education you have received:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT HISTORY**

**Present / Last Employer**      May we contact your previous employers?       Yes       No

Company	Dates worked	Title/Position		Rate of Pay
Company Address	City, State	Zip	Phone Number	
Supervisor	Reason for Leaving			
2 <sup>nd</sup> Company	Dates worked	Title/Position		Rate of Pay
Company Address	City, State	Zip	Phone Number	
Supervisor	Reason for Leaving			
3 <sup>rd</sup> Company	Dates worked	Title/Position		Rate of Pay
Company Address	City, State	Zip	Phone Number	
Supervisor	Reason for Leaving			

List all office, technical or professional skills and/or certificates, licenses and bilingual abilities you possess that are relevant to the position for which you are applying:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**TERMS OF EMPLOYMENT**

**PLEASE READ THIS SECTION BEFORE YOU SIGN THIS EMPLOYMENT APPLICATION FORM**

I understand that this is an application for employment with Christian Health Associates and that no employment contract is being offered. I further understand that if I am employed, the company or I may terminate my employment at any time with or without cause and without any prior notice. I understand that no representative of the company has the authority to make any agreement to the contrary.

I authorize the company to thoroughly investigate my work and personal history and verify all data given to the company. I authorize all individuals, schools, and firms named (except my present employer, if so noted) to provide any information about me. I hereby release from liability the company and its representatives for seeking such information and all persons, corporations, or organizations for furnishing such information.

The company is committed to providing a work environment that is free of harassment of all types. Therefore, we maintain a strict policy, which prohibits harassment in any form, including sexual harassment, whether committed by managers, supervisors, or other employees. Violation of policy will result in disciplinary action up to and including termination of employment.

It is the policy of the company to recruit, hire, and promote qualified applicants and to provide equal employment opportunities to all applicants in a manner, which will not illegally discriminate against a person in compensation or in a term, condition, or privilege of employment because of the person's race, religion, color, national origin, age, physical or mental disability, gender, marital status, changes in marital status, pregnancy, or parenthood when the reasonable demands of the position do not require distinction. It is understood that a breach of the company's policy regarding nondiscrimination, as defined herein, shall be grounds for appropriate disciplinary action up to and including termination of employment.

I certify that all statements herein are true and understand that any falsification or willful omission may or shall be sufficient cause for dismissal or refusal of employment.

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**