



**EMPLOYMENT/CONTRACT APPLICATION**

Name \_\_\_\_\_ Phone \_\_\_\_\_ (Home)  
Address \_\_\_\_\_ Phone \_\_\_\_\_ (Cell)  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ email \_\_\_\_\_  
How long at this address: \_\_\_\_\_ If less than 1 year, prior residence? \_\_\_\_\_

Date of Birth \_\_\_\_\_  
Education: # Years Completed (circle one): 1 2 3 4 Diploma: Yes \_\_\_ No \_\_\_ G.E.D.: Yes \_\_\_ No \_\_\_  
College/Vocational School: # Years Completed (circle one) 1 2 3 4 5 6 7 Degree(s) Earned \_\_\_\_\_  
Describe other Certifications, Licensures, Degrees, Trainings: \_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime? Please explain: \_\_\_\_\_

**Employment/Contract Service History (List Most Recent Experience First. May Attach Additional):**

Organization \_\_\_\_\_ Dates of Service: From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Position/Duties \_\_\_\_\_ Supervisor \_\_\_\_\_  
\_\_\_\_\_ May We Contact: Yes \_\_\_\_\_ No \_\_\_\_\_

Organization \_\_\_\_\_ Dates of Service: From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Position/Duties \_\_\_\_\_ Supervisor \_\_\_\_\_  
\_\_\_\_\_ May We Contact: Yes \_\_\_\_\_ No \_\_\_\_\_

Organization \_\_\_\_\_ Dates of Service: From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Position/Duties \_\_\_\_\_ Supervisor \_\_\_\_\_  
\_\_\_\_\_ May We Contact: Yes \_\_\_\_\_ No \_\_\_\_\_

Additional Experience/Activities/Associations /Honors \_\_\_\_\_  
\_\_\_\_\_

**Statement of Faith**

Do you consider yourself a Christian? Yes \_\_\_ No \_\_\_

If no, do you have a statement of faith? \_\_\_\_\_

If yes, how long have you been a Christian? \_\_\_\_\_

As a Christian, what is the basis of your salvation? \_\_\_\_\_

Are you a member of a local church? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how long? \_\_\_\_\_

Are you a regular attender of a local church? Yes \_\_\_\_\_ No \_\_\_\_\_ Ife yes, how long? \_\_\_\_\_

Positions you have served: \_\_\_\_\_

Please provide the following:

Church Name \_\_\_\_\_ Denomination \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Pastor and/or Elder’s Name \_\_\_\_\_ Phone \_\_\_\_\_

Is it ok to contact this Pastor/Elder? Yes \_\_\_ No \_\_\_

This organization is a pro-life Christian ministry. We believe that our faith in Jesus Christ calls us and motivates us to GO serve women, GO save lives, and GO share Jesus. Please write a brief statement about how your faith would affect your work.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**References**

Please list 3 persons who are not related to you and who have known you at least two years:

Name	Address	Phone	email	Relationship
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Additional Information**

For what position(s) are you applying? \_\_\_\_\_

What is your reason for seeking employment with ICU Mobile ?

\_\_\_\_\_  
\_\_\_\_\_

What specific duties would you be interested in performing?

\_\_\_\_\_  
\_\_\_\_\_

What do you consider your areas of strengths? \_\_\_\_\_

What do you consider your areas of weakness? \_\_\_\_\_

Are there any particular personality types with whom you work best? \_\_\_\_\_

Are there any particular personality types with whom you have difficulty working? \_\_\_\_\_

How would you rate yourself in the following areas:

a. Knowledge of how abortions are performed/methods used to perform abortions:

Excellent\_\_\_\_ Good\_\_\_\_ Fair\_\_\_\_ Poor\_\_\_\_

b. Knowledge of current laws concerning abortion:

Excellent\_\_\_\_ Good\_\_\_\_ Fair\_\_\_\_ Poor\_\_\_\_

c. Knowledge of what the Bible teaches (directly or indirectly) about abortion:

Excellent\_\_\_\_ Good\_\_\_\_ Fair\_\_\_\_ Poor\_\_\_\_

Under what circumstances would you consider abortion as an alternative for a woman with a crisis pregnancy? Never \_\_\_\_ In cases of rape/incest \_\_\_\_ In cases of extreme peril to mother's life \_\_\_\_ In cases of extreme psychological distress \_\_\_\_ Other (specify)\_\_\_\_\_

Have you ever known an unwed mother?

Please explain:\_\_\_\_\_

Have you ever counseled a woman who was considering an abortion? Yes \_\_\_\_ No \_\_\_\_

Please explain:\_\_\_\_\_

Have you had any experiences relating to abortion? Yes \_\_\_\_ No \_\_\_\_

Please explain in writing (or may be discussed confidentially during interview):

Please list any books, films or other materials you have read or viewed that relate to abortion, pregnancy or alternatives to abortion:\_\_\_\_\_

Are you currently, or have you ever been involved in seeking to adopt a child? Yes \_\_\_\_ No \_\_\_\_

Please explain:\_\_\_\_\_

**APPLICANT'S CERTIFICATION AND AGREEMENT**

I certify that the facts set forth in this application are true and complete to the best of my knowledge, and I authorize ICU Mobile to verify their accuracy and to obtain reference information concerning my character and capabilities. I release ICU Mobile and any person or entity providing such reference information, from any and all liability relating to the provision of such information or relating to any decisions made based upon such information. If I become an employee or contractor for ICU Mobile or any of its affiliates, I agree to fully adhere to its policies and rules, including those rules relating to maintaining client and ministry confidentiality. I certify that I have read and am in full agreement with the attached Mission, Statement of Faith, and Statement of Principle.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**For Office Use Only:**

Date Received \_\_\_\_\_ Date Interviewed \_\_\_\_\_ Hired Yes \_\_\_ No \_\_\_

Service Start Date \_\_\_\_\_ Service End Date: \_\_\_\_\_