

**IOWA ANNUAL CONFERENCE
FLOOD INTERN APPLICATION
PERSONAL INFORMATION**

Name _____ Email _____

Street Address _____ City, State, Zip Code _____

Cell Phone Number (____) _____ DOB _____

POSITION/AVAILABILITY: Position Applied for _____

Assistant Program Manager

Worship and Worksite Intern

Hospitality and Worksite Intern

Administration, Public Relations, and Worksite Intern

NOMAD Site Manager

Materials and Worksite Intern

What date are you available to start work? _____

EDUCATION:

Name and Address Of Schools - Degree/Diploma - Graduation Date

Skills and Qualifications: Licenses, Skills, Training,

DO YOU HAVE A DRIVER'S LICENSE? __ Yes __ No

What is your means of transportation to work? _____

Driver's license number _____ State of issue _____ Expiration date _____

Have you had any accidents during the past three years? _____ How many? _____

Have you had any moving violations during the past three years? How Many? _____

Please list two references one employer and one other

Name _____ Name _____

Position _____ Position _____

Company _____ Company _____

Address _____ Address _____

Telephone () _____ Telephone () _____

Are there any specific dates that you need off during the summer?

If so, when? _____

Have you ever been convicted of a crime? _____ If so, what? _____

Questions – Please answer briefly the following questions and email them to melisa@fumcmarion.org.

1. Tell about 2 persons who have been major influences in your life?
2. What is your favorite scripture verse?
3. What experience have you had with construction?
4. What experiences have you had leading mission teams?
5. Why do you want to work in Flood Recovery?

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

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 _____