



Please submit this application for employment to:  
Chip Redfern  
Kanuga Conferences, Inc.  
Post Office Box 250  
Hendersonville, NC 28793-0250 USA  
Email: chip.redfern@kanuga.org • Fax: 828-696-3589

Please type or print with an ink pen. Attach a recent photo (optional).

**VITAL INFORMATION**

Name \_\_\_\_\_ Preferred \_\_\_\_\_

Social Security Number \_\_\_\_\_

Birth Date (optional) \_\_\_\_\_ Gender (optional)  Male  Female

Present Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Permanent Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_

Are you a U.S. citizen?  Yes  No

If no, are you legally entitled to work in the United States?  Yes  No

Earliest date you can start work \_\_\_\_\_ Latest date you must end work \_\_\_\_\_

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

Have you ever been convicted of any crime other than a minor traffic violation?  Yes  No

If yes, please explain: \_\_\_\_\_

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

*Note: A conviction may not automatically disqualify the applicant from employment.*

**GENERAL INFORMATION**

Church (optional) \_\_\_\_\_

How did you learn of Kanuga? \_\_\_\_\_

List certifications or special skills \_\_\_\_\_

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

List any other experience, talents or skills you feel are applicable to the job for which you are applying

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



**EDUCATION**

|                                      |                |                                  |
|--------------------------------------|----------------|----------------------------------|
| College/University Name and Location | Dates Attended | Field of Study/Graduation Status |
| College/University Name and Location | Dates Attended | Field of Study/Graduation Status |
| High School Name and Location        | Dates Attended | Graduation Status                |

**EMPLOYMENT HISTORY**

List three employers, starting with the most recent.

|                          |                     |                     |  |
|--------------------------|---------------------|---------------------|--|
| Company Name and Address | Position and Duties | Dates of Employment | Immediate Supervisor's Name & Telephone Number |
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May we contact your employers?  Yes  No

**HEALTH INFORMATION**

A completed health statement is required of all staff when reporting to work. Do you have any physical, mental or emotional problems that might interfere with your ability to perform the position for which you are applying?  Yes  No      If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

Emergency Contact \_\_\_\_\_ Telephone ( \_\_\_\_\_ ) \_\_\_\_\_



**ESSAY**

Kanuga's Statement of Purpose

*Kanuga's purpose is to provide for God's people in this broken world a glimpse of the Kingdom through hearing the Gospel, experiencing Christian community and being empowered for strength, growth, and service in both our individual communities and in the rest of God's creation.*

In approximately 200 words, please explain how you can enable Kanuga to fulfill its purpose. Please attach your essay to this application.

**REFERENCES**

Three letters of recommendation for each applicant are required from persons other than a relative. Those persons might be a teacher, a professor, a former employer or a minister. Give each person one of the enclosed reference forms. Be sure to provide each of your references with a stamped envelope addressed to Chip Redfern at Kanuga Conferences, Inc., or fax to (828) 696-3589.

|      |          |                 |                  |
|------|----------|-----------------|------------------|
| Name | Position | Mailing Address | Telephone Number |
| Name | Position | Mailing Address | Telephone Number |
| Name | Position | Mailing Address | Telephone Number |

**COMMITMENT OF APPLICANT**

I fully understand that Kanuga has certain standards of conduct and appearance as spelled out in the attached information sheet. If my application is accepted, I can be depended upon for my cooperation in maintaining those standards. I further understand the importance of remaining at Kanuga and fulfilling my obligations until the expiration date of my agreement or contract.

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

Parent/Guardian Signature (if under 18) \_\_\_\_\_ Date \_\_\_\_\_

**THANK YOU FOR APPLYING TO BE PART OF THE KANUGA STAFF**



**CONSENT FOR RELEASE OF STAFF MEMBER/APPLICANT INFORMATION**

Criminal Records/Motor Vehicle Check

Full Name (First, Middle, Last): \_\_\_\_\_

Date of Birth (optional if over age 39) \_\_\_\_\_ Social Security # \_\_\_\_\_

Alias (if applicable): \_\_\_\_\_

Driver's License # \_\_\_\_\_ State or issuing jurisdiction \_\_\_\_\_

Please list location of school and home residences for the past 10 years (current & most recent first).

| Address, City, State, ZIP Code | County | Area Code | Dates of Residence |
|--------------------------------|--------|-----------|--------------------|
|                                |        |           |                    |
|                                |        |           |                    |
|                                |        |           |                    |
|                                |        |           |                    |
|                                |        |           |                    |
|                                |        |           |                    |

I understand that Kanuga Conferences, Inc. has a practice of requesting a background check, which could include a criminal records and motor vehicle check on prospective staff members prior to contract confirmation. I hereby authorize the agency chosen by Kanuga Conferences, Inc. to provide the requested information.

I hereby grant permission and authorize the above-mentioned checks and give permission to allow verification of any information given on my application. I understand that failure to provide accurate information may result in nullification of offer or termination. I understand that the information obtained will become part of my employment application.

Staff Member/Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_ Date: \_\_\_\_\_

*Kanuga Office Use:*

1. Date completed application received: \_\_\_\_\_
2. Essay attached: yes \_\_\_\_\_ no \_\_\_\_\_
3. Reference forms received: 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_
4. Telephone and/or personal interview: date \_\_\_\_\_
5. Comments: