

Application for Continuum of Care Position

Name: _____ Daytime Phone: _____

Address: _____ Evening Phone: _____

City: _____ State: _____ Zip: _____

Email address: _____

1. Please explain your interest in assuming this role at Assurance: _____

2. Training in specific best practices in this field will be shared as part of training, but please describe the general approach you would take in assisting a woman or couple considering abortion?

3. Describe your familiarity with regional churches, social services agencies, and other area resources.

4. Describe current or past roles held or services performed for other organizations or other life experiences that you feel directly relate to this role: _____

5. What special skills, talents, gifts, or personality traits would you contribute to this ministry?

6. What would you say are your strengths and weaknesses? _____

7. How do you manage conflict with others? Give a specific example. _____

8. What has been your experience working with and training volunteers?

9. How would you assess your knowledge of the biblical teaching on the sanctity of human life?

10. Under what circumstance, if any, is abortion justifiable in your opinion? Explain. _____

11. When do you feel sexual intercourse is morally permissible? Explain. _____

12. Are you uncomfortable with any aspect of the Center's [Statement of Faith](#) or [Statement of Principle](#)? Yes _____ No _____ If yes, please explain. _____

13. What is a Christian? _____

14. Give a brief statement of how you came to know Christ as your Lord and Savior. _____

15. How has your life changed since you came to know Christ as your Savior? _____

16. Please provide the following information about your church:

Church name: _____ Phone: _____

Address: _____

Senior Pastor: _____

Denominational ties, if any: _____

How is God using you in your current church? _____

How would you characterize your devotional life? _____

Give one example of the power of prayer from your life: _____

References: Please provide contact information for your pastor, and at least one professional reference and character reference.

Name: _____ Relationship: _____

Address: _____

Phone Number: _____ Email address: _____

Name: _____ Relationship: _____

Address: _____

Phone Number: _____ Email address: _____

Name: _____ Relationship: _____

Address: _____

Phone Number: _____ Email address: _____

Name: _____ Relationship: _____

Address: _____

Phone Number: _____ Email address: _____

What pay range might you expect? Do not reply “negotiable” _____

APPLICANT’S CERTIFICATION AND AGREEMENT

APPLICANT’S CERTIFICATION AND AGREEMENT: I certify that the facts set forth in this employment application are true and complete to the best of my knowledge, and I authorize Assurance for Life to verify their accuracy and to obtain reference information on my work performance and character. I give permission to Assurance for Life to conduct a criminal background check to the extent that the position for which I am applying may involve interaction with minors. I release Assurance for Life 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 employment decisions made based upon such information. I understand that, if employed, any falsified statements or omissions of material information on this application may lead to my prompt dismissal. If I am offered and accept employment, I agree to fully adhere to the policies and rules of Assurance for Life. However, I understand that neither the existence of such policies and rules nor anything said during my interview process shall be deemed to create an express or implied employment contract. I UNDERSTAND THAT ANY EMPLOYMENT THAT MAY BE OFFERED TO ME WILL BE FOR AN INDEFINITE DURATION AND ON AN AT-WILL BASIS. I understand that either Assurance for Life or I will have the right to terminate any such employment at any time with or without notice or cause. I further certify that I have read and that I am in full agreement with Assurance for Life’s [Statement of Faith](#) and [Statement of Principle](#).

Signature of Applicant: _____ Date: _____