



*Bethlehem*  
ACADEMY

INSPIRING TRUTH SINCE 1865

105 Third Avenue S.W. • Faribault, MN 55021  
Phone: 507-334-3948 • Fax: 507-334-3949  
www.bacards.org

Date of application: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip

Telephone: Residence (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

Position desired: \_\_\_\_\_

Date available for work: \_\_\_\_\_ Salary desired: \_\_\_\_\_

Are you an alumni of BA?: \_\_\_\_\_ Do you have students at BA?: \_\_\_\_\_

Type of employment: ☐ Full-time ☐ Part-time (# hrs/wk) \_\_\_\_\_ ☐ Temporary ☐ Seasonal

Hours/days available: ☐ Day ☐ Evening ☐ Night ☐ Weekdays ☐ Weekends

Are you 18 years of age or over? ☐ Yes ☐ No

Are you legally eligible for employment in the United States? ☐ Yes ☐ No

Are you able to provide the acceptable Form I-9 document(s) for employment? ☐ Yes ☐ No

Can you do the listed job duties with or without reasonable accommodations? ☐ Yes ☐ No

## EDUCATION

(Include high school and/or institution issuing GED and any additional education/courses taken. Do not list dates of attendance for high school. List most recent education first.)

Name of School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Degree/Diploma Received: \_\_\_\_\_ Major/Minor: \_\_\_\_\_



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Name of School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Degree/Diploma Received: \_\_\_\_\_ Major/Minor: \_\_\_\_\_

MILITARY TRAINING (List dates and training received): \_\_\_\_\_

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

## EMPLOYMENT, VOLUNTEER AND MILITARY EXPERIENCE

Please list all work, volunteer and military experiences (include self-employment, if any) starting with most recent or current experience.

1. MOST RECENT OR CURRENT EMPLOYER: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Starting wage: \_\_\_\_\_ Ending wage: \_\_\_\_\_  
month/day/year month/day/year

Job title: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Description of work and skills used (include tools, equipment and computer skills): \_\_\_\_\_

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

Accomplishments: \_\_\_\_\_



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**2. EMPLOYER:** \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Starting wage: \_\_\_\_\_ Ending wage: \_\_\_\_\_  
month/day/year month/day/year

Job title: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Description of work and skills used (include tools, equipment and computer skills): \_\_\_\_\_

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

Accomplishments: \_\_\_\_\_

**3. EMPLOYER:** \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Starting wage: \_\_\_\_\_ Ending wage: \_\_\_\_\_  
month/day/year month/day/year

Job title: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Description of work and skills used (include tools, equipment and computer skills): \_\_\_\_\_

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

Accomplishments: \_\_\_\_\_



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**EXPLAIN GAPS IN WORK HISTORY** (please provide month/day/year for each gap)

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**ADDITIONAL INFORMATION**

Please list any other skills, abilities, worker traits, computer knowledge, licenses/certifications or anything else not listed above that would be a reason for us to hire you.

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List/describe any other training and/or experience relevant to the position for which you are applying.

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List/describe your experience with computers and list software applications you have used.

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**REFERENCES**

List three persons (not related to you) who can be contacted regarding your qualifications, work habits and character.

1. 

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Name Address

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Telephone Email Occupation Years Known

2. 

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Name Address

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Telephone Email Occupation Years Known



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3. \_\_\_\_\_

Name	Address	Telephone	Email	Occupation	Years Known
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I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed; falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

All prospective employees are subject to a background check through The McDowell Agency and must complete VIRTUS training prior to employment at Bethlehem Academy.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Applications may be mailed to Bethlehem Academy at the address listed above, emailed to: [lmoon@bacards.org](mailto:lmoon@bacards.org) or faxed to 507.334.3949