

Full Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_

Home Address: \_\_\_\_\_ Home Telephone:( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name you go by: \_\_\_\_\_ Age: \_\_\_\_ Birthday: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Height: \_\_\_\_ Weight: \_\_\_\_

Any Disabilities? If so, Explain: \_\_\_\_\_

Have you ever been injured? If so, Explain: \_\_\_\_\_

College (University) Attending: \_\_\_\_\_ Major: \_\_\_\_\_

Address: \_\_\_\_\_ Sr. in HS Fr So Ju Sr Other \_\_\_\_\_  
(Please circle one)

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_  
(This is your mailing address at school)

E-mail: \_\_\_\_\_ Cell phone:( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

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

Your Brothers/Sisters: \_\_\_\_\_ Age \_\_\_\_\_ Age \_\_\_\_\_  
(First Names)

\_\_\_\_\_ Age \_\_\_\_\_ Age \_\_\_\_\_

Your Longest period away from Home: \_\_\_\_\_ Reason: \_\_\_\_\_

Musical Instruments Played: \_\_\_\_\_

Sports Played: \_\_\_\_\_

Hobbies, activities you enjoy: \_\_\_\_\_

Have you ever been on retreat here? \_\_\_\_ If yes, When? \_\_\_\_\_ Church: \_\_\_\_\_

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

Home Church: \_\_\_\_\_ Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

City, State: \_\_\_\_\_ Pastor Name: \_\_\_\_\_

**Personal References:**

1. \_\_\_\_\_ Address: \_\_\_\_\_  
Phone No: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
City,State Zip

2. \_\_\_\_\_ Address: \_\_\_\_\_  
Phone No: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
City,State Zip

3. \_\_\_\_\_ Address: \_\_\_\_\_  
Phone No: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
City,State Zip

**Business References:**

1. Business: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone No.: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
Position You Held: \_\_\_\_\_  
(City, State) (Zip)

2. Business: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone No.: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
Position You Held: \_\_\_\_\_  
(City, State) (Zip)

3. Business: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone No.: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
Position You Held: \_\_\_\_\_  
(City, State) (Zip)

Share your personal testimony, including why you want to work here

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(please continue on back)

**Please include a recent picture of yourself with this Application!!**

\_\_\_\_\_/\_\_\_\_\_/20\_\_\_\_\_  
Signed Date

By signing this application, I give permission to the staff of Garden City Chapel to check my references and conduct a background check.

Mail to: Garden City Chapel and Retreat, 316 North Dogwood Drive, Garden City Beach, SC 29576  
gardencitychapel@sc.rr.com / www.Gardencitychapel.com

**Do Not Write Below This Line**

Interview

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Neatness	Character	
Personality	Ability	
Work Interview	Summer Staff Comments	
Date Interviewed	Hired	Will Report