

Thank you so much for your interest in serving at Eden's Glory. We are so inspired and encouraged each time someone steps forward to sacrifice their time, resources and energy to serve others.

The first step in joining our team is to fill out the application packet and return it to our office. We also require each applicant to submit to a background check for the safety and security of our residents.

Attached you will find the rules and regulations. These are expectations that we hold of the residents and volunteers and so we also will require that staff will abide by these when on duty at Eden's Glory so please examine them carefully. By signing our forms you indicate that you understand and will abide by the standards in place.

We are confident that you will be blessed by your time in service and we want you to know from the start how appreciative we are of your willingness to even begin this journey with us! The work will be rewarding but is not always easy so we ask that you be prepared in advance for days of seeming thankless work, discouragement and frustration. But please know that not only are we thankful for your service but the Lord will bless your sacrifice as well and we all have to be faithful in planting the seeds, trusting that he will do the work of growth! Know that through your time here, you will be covered in prayer and we want to be available as a support to you as well through this process.

So excited about beginning this work with you! If you have any questions or concerns, please feel free to contact us at (314) 877-8040.

With Gratitude and Prayer,

Annie Schomaker, Program Director

Application Checklist

Please return these completed items to: Eden's Glory, PO Box 164, Maryville, IL 62062 or email to ginger@edensglory.org

- ✓ Staff Rules and Regulations
- √ Completed Application (dated & signatures)
- √ Staff Waiver
- √ Staff Agreement
- √ Confidentiality and Privacy Agreement
- ✓ Copy of driver's license, state ID, military ID or passport
- ✓ Application fee of \$25 to cover cost of your background check. Checks can be made out to Eden's Glory. This will only be required once we are further along in the application process and if you have been approved for all other purposes.

APPLICANT NAME:	n
APPLICANT NAME:	1

Staff Rules and Regulations

By signing below, I agree that if I am hired for a staff position I will abide by the following rules and regulations:

- 1. I will agree to not participate in the use or sale of illicit drugs.
- 2. I will agree to maintain the privacy of the location and the residents by not taking unapproved pictures, sharing the address with others or taking unapproved individuals to the home.
- 3. I agree to refrain from any romantic or sexual relationship with residents during their time in the program and for no less than 1 year following their graduation.
- 4. I agree that Eden's Glory is not responsible for the damage or loss of any personal items while working on location or off location with residents.
- 5. I will agree that Eden's Glory cannot be held liable for any accident/injury or loss while working on location or off location with residents.
- 6. I understand and agree my services at Eden's Glory will be "at-will". This means that staff or myself can end my service at Eden's Glory without notice.
- 7. I agree to not bring any type of weapon on campus. This includes but is not limited to: guns, knives, swords, mace, brass knuckles, bats, or any item that could be considered a weapon.
- 8. I understand and agree to be bound by the bylaws and policies of Eden's Glory and to refrain from any conduct in violation of Eden's Glory's rules, handbooks, programs, policies, written materials, teachings and Eden's Glory's interpretation of Biblical scripture.
- 9. I understand that all policies are subject to change without notice.

Signature	Date	-

APPLICANT NAME:	
ALLINGANI NAMI.	

Job Application

Job Application		
Position applying for:		
PERSONAL INFORMATION		
First Name:	Last Name:	
Soc. Sec #:		
Marital Status: Married Divorced	Single Widow(er)	
	Age	Gender: M or F
Address:		
Street City	State	Zip Code
Home Phone: ()		
Cell Phone: ()		
Email address:		
Church affiliation:		
PERSONAL BACKGROUND		
Education Check Your Highest Level of Education and Type of Degree:		
 8th (completed or current) H.S. (completed or current) GED 		
 College Degree (completed or current) Type of Degree: Master's Degree (completed or current) Type of Degree: Doctoral Degree (completed or current) Type of Degree: 		
Are you fluent in any other language besides English? Yes No		
If 'yes', please list.		

APPLICANT NAME:	
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Employment History & Relevant Experience

Please list your last three jobs beginning with you most recent employer.			
(#1) Company Name:	Dates Employed:	Pos	iition Title:
Description of Duties:	Name of Supervisor & Contact info:		Contact info:
(#2) Company Name:	Dates Employed:		Position Title:
Description of Duties:	Name of Supervisor & Contact info:		Contact info:
(#3) Company Name:	Dates Employed:		Position Title:
Description of Duties:	Name of Supervisor & Contact info:		Contact info:
List any experience you have that will be relevant to your role at Eden's Glory that may not be reflected in your employment history. (other organizations you've volunteered for, etc)			
Please list any other information that may be useful in the evaluation of your application. (i.e. special training, certifications, CPR, etc.)			
Citizenship Are you a citizen of the United States? Yes No			
If you are not a citizen of the United States, are you legally authorized to work in the U.S? Yes No			
Please list each country of residence for the past 5 years beginning with your most recent.			

Please provide 3 contacts for reference. Two personal and one professional, these should not be relatives of yours.		
(#1) Personal Reference:	Dates known:	Nature of relationship?
Address:	Phone:	
	Email:	
(#2) Personal Reference:	Dates known:	Nature of relationship?
Address:	Phone:	
	Email:	
(#3) Professional Reference:	Dates known:	Nature of relationship?
Address:	Phone:	
	Email:	
Criminal Background		
Have you ever been convicted of, plead guilty to, or no contest to a felony? Yes or No		
If 'yes', please explain:		
Medical & Contact Information		
In case of an emergency please contact:		
Name: Relationship:		
Home/Cell #: ()		
Work#: ()		

6

APPLICANT NAME: _____

References

APPLICANT NAME:	7	
Do you have any known medical conditions:		
Are you aware of any medical condition the services of a volunteer without reason	s that would prevent you from performing nable accommodation?	
Driving information: WARNING: Clearance must be obtained before you drive any company vehicles vehicle. Check with the office before op the organization or it's affiliates.	or transport any residents in your personal	
Driver's License Number:	State of Issue:	
Expiration Date:	Restrictions?	
·	chicle accidents while driving in the past 5 ease explain. Hoving violations during the past 5 years?	
Do you carry at least liability insurance or	n your automobile? Yes or No	
If 'yes', what are your coverage limits liste	ed on your policy?	
If 'yes', please identify your insurance co	mpany:	
I represent that each of my responses in a lagree to notify the staff of Eden's Glory above information.	this application are truthful and accurate. should there be any changes in the	
Signature	Date	

PERSONAL REFLECTION

Please answer briefly each of the following questions to help us get to know you:
1) How did you come to know Jesus Christ?

2) How would working at Eden's Glory fit into your personal mission as a Christian?

3) What role are you interested in having at Eden's Glory and what makes you qualified for it?

Thank you for your time in this process. We look forward to working with you and if you have any questions please feel free to contact our office at (314) 877-8040.

APPLICANT NAME:	

9

STAFF WAIVER

To be filled out by every staff mem	ber when hired.
activities of Eden's Glory by choice screening and training requiremen	, hereby voluntarily agree to participate in e. I understand that I must complete all ats before I can begin working at Eden's Glory. It to discontinue my service for any reason at any
all its employees from all liability. I u	sociated and agree to release Eden's Glory and understand that this release covers liability, or in part by any acts of voluntary work.
I recognize that by signing this rele for injuries, damages or losses I ma	ase I am giving up the right to sue Eden's Glory y occur.
I have read and understand this co	onsent.
Signature	Date

APPLICANT NAME:	
ALLEICANT NAME.	

STAFF AGREEMENT

- 1. The acceptance of this completed application does not mean that a staff position is open or that Eden's Glory has agreed to accept me. Eden's Glory is under no obligation to hire me as the result of receiving this completed application.
- 2. As part of the procedure for processing my application or evaluating me for a potential job, Eden's Glory may obtain an investigative report including information gathered via a background check and personal references. This inquiry may include information such as my character, general reputation, any criminal background and personal characteristics—whichever may be applicable.

By signing this application, I authorize Eden's Glory to request and obtain the information described above. Further, I release Eden's Glory, affiliates, related entities, agents, attorneys at law, employees and officers and all prior employers, references and records custodians from any claim or liability whatsoever arising out of such request or nay information disclosed in response thereto, and I agree not to bring any action or assert any claim against Eden's Glory or such prior employer or other reference on account thereof.

A photocopy or facsimile of this authorization shall be as valid as the original.

3. I understand that my providing of false or misleading material information or my failure to state material facts either in this application or in any interviews will result in my immediate dismissal by Eden's Glory as a Staff member.

nave read and understand the above and agree to be bound by them. I
acknowledge that this is a legal document. I understand that I have the
opportunity to consult with an attorney before signing this legal document. I sigr
this document of my own free act and will.

Signature	Date

APPLICANT NAME:	

CONFIDENTIALITY AND PRIVACY AGREEMENT

We are so thankful for your interest in working with the women at Eden's! We couldn't do this without your help! In order to maintain the privacy of Eden's Glory and dignity of the women we ask that you agree to the following as you serve at the home:

By signing below, I agree that by working or volunteering in any form at Eden's Glory I will maintain the privacy of the location and residents by:

- Not taking unapproved pictures
- Turning the location device off in my phone
- Not sharing the address with others, not writing down the address nor putting the address into my GPS
- Not taking unapproved individuals to the home.
- Helping to address privacy issues if/when I hear others talking about the location.

Signature	 Date	