

# ORAL ROBERTS MINISTRIES (ORM) Employment Application

To fill out this interactive document via computer, we recommend using Adobe Reader. Download Adobe Reader [here](#).

Date of Application: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_ Apt. #: \_\_\_\_\_

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

Telephone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ Message Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Position Desired: ☐ Full-Time    Part-Time    Seasonal

1.) \_\_\_\_\_ Shift Preferred:    Morning    Afternoon    Evening

2.) \_\_\_\_\_ Salary Expected: \_\_\_\_\_

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

Have you worked for Oral Roberts Ministries (aka Oral Roberts Evangelistic Association) before?    Yes    No

If so, what department? \_\_\_\_\_ If so, under what name? \_\_\_\_\_

## EDUCATION

Name of College University, or Technical School	Location: City & State	Highest Grade Complete	Graduated (YES or NO)	Degrees, Certificates Received (B.A., B.S., etc.)	Fields of Study: Major and/or Minor
			Yes    No		
			Yes    No		
			Yes    No		
			Yes    No		
			Yes    No		
			Yes    No		

Name of High School	Location: City & State	Highest Grade Complete	Graduated (YES or NO)
			Yes    No

Have you ever been convicted of a felony?    Yes    No    (A yes answer does not automatically disqualify you from employment since the nature of the offense, and the type of job for which you are applying will be considered.)

If yes, explain:

Date of Conviction: \_\_\_\_\_

## ESSENTIAL FUNCTIONS

- Have you read a listing of the “essential functions” of the position for which you have applied?      Yes      No  
(If no, refer to online postings or ask to review that listing before completing this section.)
  - Are you able to perform or safely perform the essential functions of this job as described, with or without any reasonable accommodations?      Yes      No
- What office machines or other equipment do you operate? (i.e., personal computer, 10-key, forklift, etc.)  
Estimated typing speed? \_\_\_\_\_
- If you possess PC Skills, what software are you competent in?  
\_\_\_\_\_
- List any special training, achievements, skills, military training that you possess which relate to the job for which you are applying.  
\_\_\_\_\_
- Can you work over 40 hours per week?      Yes      No  
Weekends?      Yes      No      Holidays?      Yes      No
- Are you related to anyone in the department for which you are applying?      Yes      No  
If so, their name(s): \_\_\_\_\_
- Are you related to anyone working at ORM?      Yes      No  
If so, their name(s): \_\_\_\_\_

## PROFESSIONAL LICENSES, REGISTRATIONS, AND/OR CERTIFICATIONS

- Type: \_\_\_\_\_ State Issued: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Cert. No.: \_\_\_\_\_ Annual No.: \_\_\_\_\_
- Type: \_\_\_\_\_ State Issued: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Cert. No.: \_\_\_\_\_ Annual No.: \_\_\_\_\_
- Please list professional organizations, special interests, or hobbies (omit any which might indicate race, gender, age, national origin, disability, or veteran status).  
\_\_\_\_\_
  - Please give a brief statement of your career objective. \_\_\_\_\_

## SPIRITUAL INFORMATION

- Name and location of church you attend: \_\_\_\_\_
- Are you a regular attendant? \_\_\_\_\_
- Do you take an active part?      Yes      No      If so, what activities are you engaged in?  
\_\_\_\_\_
- Have you accepted Jesus Christ as your personal Savior and Lord?      Yes      No
- Do you believe God saves the soul of man?      Yes      No

**EMPLOYMENT HISTORY**  
(Start with current or most recent employer)

1. Name of Company: \_\_\_\_\_ Employment Dates: \_\_\_\_\_ to \_\_\_\_\_

Rate of Pay: \_\_\_\_\_ Job Title: \_\_\_\_\_ Full-Time?      Yes      No

Address: \_\_\_\_\_

Describe in detail the work you did:

City/State/Zip: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

2. Name of Company: \_\_\_\_\_ Employment Dates: \_\_\_\_\_ to \_\_\_\_\_

Rate of Pay: \_\_\_\_\_ Job Title: \_\_\_\_\_ Full-Time?      Yes      No

Address: \_\_\_\_\_

Describe in detail the work you did:

City/State/Zip: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

3. Name of Company: \_\_\_\_\_ Employment Dates: \_\_\_\_\_ to \_\_\_\_\_

Rate of Pay: \_\_\_\_\_ Job Title: \_\_\_\_\_ Full-Time?      Yes      No

Address: \_\_\_\_\_

Describe in detail the work you did:

City/State/Zip: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

4. Name of Company: \_\_\_\_\_ Employment Dates: \_\_\_\_\_ to \_\_\_\_\_

Rate of Pay: \_\_\_\_\_ Job Title: \_\_\_\_\_ Full-Time?      Yes      No

Address: \_\_\_\_\_

Describe in detail the work you did:

City/State/Zip: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

## PERSONAL INFORMATION

Are you familiar with the ministry and life-style of the Oral Roberts Ministries?      Yes      No

Are you legally authorized to work in the United States for Oral Roberts Ministries?      Yes      No

*NOTE: All individuals who apply for job positions are prompted to answer this question to ensure Oral Roberts Ministries complies with federal law. If hired, a Form I-9, Employment Eligibility Verification, must be properly completed and satisfied at the start of employment. Oral Roberts Ministries does not discriminate against applicants because of their race, ethnicity, or national origin.*

Please explain, briefly, why you wish to be employed by Oral Roberts Ministries:

## REFERENCES

List three (3) persons, other than relatives, who have been well acquainted with you within the past two years:

Name	Occupation	Address/City/State/Zip	Telephone

How did you learn about our open position:      Tulsa World Ad      Craig's List      Radio

Other: \_\_\_\_\_

In completing this application, I understand that if a conditional offer of employment is extended, I will conform to the rules and regulations of the company, and that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the company or myself.

I authorize Oral Roberts Ministries (ORM) to make an investigation of all information contained in this application for employment, and I release from liability all companies, corporations, or personal references named or to whom the ministry may refer to in supplying such information. I understand that any false answers, statements, omissions or implications made by me on this application or in the interview process shall be considered sufficient cause for denial of employment or immediate discharge. Upon termination of my employment, I release ORM from any and all liability. I authorize the request of a copy of my motor vehicle driving record and any other investigative report or criminal arrest check deemed necessary from various third party sources. If requested, I will take a physical examination after a job offer has been extended and I understand that my employment will be conditional upon passing such exam.

I understand that if I am employed, such employment is for an indefinite period of time and that the company can change wages, benefits and conditions at any time. I have read and understand the above and acknowledge that the information provided is complete and accurate.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*ORM employs, advances, admits, and treats in its employment, all persons without regard to race, national or ethnic origin, sex, age, disability, or status as a veteran.*

**Mail to:** ORM Human Resources Office, P.O. Box 2187, Tulsa, OK 74102-2187

**Or save and email to:** [employment@oralroberts.com](mailto:employment@oralroberts.com)

**Phone:** (918) 591-2113 **Website:** [www.oralroberts.com](http://www.oralroberts.com) **Fax:** (918) 591-2160

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