



FOUNDATIONS

CHRISTIAN COUNSELING

Employment Application

Please accurately answer each question in its entirety. Please print or type.

Date: _____

Demographic Information:

Name - Last: _____ **First:** _____ **Middle:** _____

Address - Street: _____

City: _____ **State:** _____ **Zip:** _____

Contact - Phone 1: _____ **Phone 2:** _____

Email: _____ **Texting:** Yes-Phone 1 Yes-Phone 2 No

Social Security Number: _____

Position Applying for: _____

Salary Requirement: _____

Education (A Master's Degree in the Counseling field or an M.Div is required for a counseling position):

Graduate School: _____

Address - Street: _____

City: _____ **State:** _____ **Zip:** _____

Degree: _____

Area of Focus: _____ **GPA:** _____

2nd Graduate School (if any): _____

Address - Street: _____

City: _____ **State:** _____ **Zip:** _____

Degree: _____

Area of Focus: _____ **GPA:** _____

Undergraduate School: _____ **Graduation Date:** _____

Address - Street: _____

City: _____ **State:** _____ **Zip:** _____

Course of Study: _____ **Minor/Focus:** _____

If you are fluent in any other language, please specify & indicate proficiency level:

Other Relevant Training/Certifications: _____

Please indicate your level of comfort learning and using technology (Circle one):

It's difficult for me.

I'm somewhat comfortable.

I'm very comfortable.

Please summarize skills or additional training and qualifications acquired from employment, military service, or other experience.

References:

Please list at least 3 references familiar with your job or school performance, personal characteristics, and spiritual commitment who have known you for a minimum of one year.

Please do not list relatives.

Supervisor Reference (Maybe a manager, professor, pastor, etc.):

Name: _____

Nature of Relationship: _____ Years Known: _____

Organization: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Personal Reference:

Name: _____
Nature of Relationship: _____ Years Known: _____
Organization: _____
City: _____ State: _____ Zip: _____
Phone Number: _____

Christian Reference (Pastor, youth leader, elder, etc.):

Name: _____
Nature of Relationship: _____ Years Known: _____
Organization: _____
City: _____ State: _____ Zip: _____
Phone Number: _____

Other Reference:

Name: _____
Nature of Relationship: _____ Years Known: _____
Organization: _____
City: _____ State: _____ Zip: _____
Phone Number: _____

Spiritual Information:

Employment at Foundations is more than simply a job; it is a ministry. Counselors at Foundations are more than employees but ministers of the Gospel. As a minister at Foundations, it is essential that we share the same basic tenets of faith. To help us evaluate our compatibility, please take a moment to read through our Statement of Faith, sign if you agree, and answer the following questions.

Statement of Faith: Foundations Christian Counseling Services staff, board members, officers, and interns subscribe to the following statement of faith.

We Believe:

1. There is one God who exists in three persons: Father, Son, and Holy Spirit (Jn 10:30, Mt 28:19).
2. Jesus Christ (the Son of God) was born of a virgin (Isa 7:14, Mt 1:23), was sinless (Heb 4:15, 7:26), performed miracles (Jn 2:11), and died on the cross as an atoning sacrifice for our sins (1 Cor 15:3, Eph 1:7, Heb 2:10). Jesus was resurrected (Jn 11:25, 1 Cor 15:4, 1 Pet 1:3-4), ascended into heaven (Mk 16:19), and He will return in his glory and power (Acts 1:11, Rev 19:11).
3. A person becomes justified by grace through faith in Jesus Christ (Rom 3:24-26).
4. The Bible is the infallible, inspired, inerrant, and authoritative Word of God (2 Tim 3:16, 2 Pet 1:21).

5. The Holy Spirit indwells the lives of believers and regenerates sinful humanity, gives illumination to the Word of God, and convicts people of sin to enable the Christian to live a godly life (Rom 8:9, 13-14; Eph 4:30, 5:18).
6. We believe God creates each human person in His own image at the moment of conception and carefully knits them in their mother's womb (Psalm 139). We believe He intentionally creates each person in His image with unchanging biological sex, either male (man) or female (woman) (Genesis 1:26-27), and that as a result of sin, we do not enjoy the life or relationships that God intends for us (optional ital).
7. We believe He established marriage with only one meaning: a life-long covenant between one man and one woman, and that this unique covenantal relationship expresses the mystery of Christ and the Church (Gen 2; Eph. 5). We believe God commanded that no intimate sexual activity occurs outside of the bonds of marriage (1 Corinth. 6-7).
8. We believe that any form of sexual immorality (including adultery, fornication, homosexual behavior, bisexual conduct, bestiality, incest, pornography, and attempting to change one's biological sex or otherwise acting upon disagreement with one's biological sex) is sinful and offensive to God. (Matt 15:18-20; 1 Cor 6:9-10.)
- 9) Membership in the family of God and His church is important for fellowship, belonging, encouragement, and accountability (Heb 10:25).

Signature: _____ **Date:** _____

Habitual Sin: As expressed in the above Statement of Faith, Foundations adheres to the doctrine that justification comes by grace through faith in Jesus Christ. We also believe it is important to live out our faith by striving to conform our lives to the pattern in Scripture - Christ-likeness. Foundations does not expect any employee to live a wholly perfect and sinless life. However, we expect that as ministers and counselors of His Word, we live as Christian examples by refusing to live in habitual sin. This may involve a variety of life patterns, including but not limited to persistently breaking the law, living with partners while not married, sexual relations outside marriage, and living in a state of persistent and current addiction. For questions or more information, please contact Foundations' Executive Director.

I understand and will adhere to Foundations' stance on habitual sin.

Signature: _____ **Date:** _____

Are you currently attending church? Yes No

If yes, what is the name of your church? _____

What is your pastor's name? _____

Foundations' Counseling Philosophy:

We are committed to providing Christ-centered and biblical counseling to all who seek our services consistent with our beliefs and within our scope of practice. We believe that an individual's emotions, thoughts, behaviors, and interactions are caused by motives that stem directly from the heart. Though the cause of most behaviors comes from the heart, we recognize that we are created as spirit and body. Therefore, we recognize that many actions and interactions are *influenced* by our body chemistry (*hormones, deficiencies, adrenaline, etc.*) and our situations and circumstances. We desire to provide counseling that is Christ-centered, Spirit-led, and hope-focused to help clients find peace emotionally, relationally, and spiritually.

We believe that our past influences affect present realities and relationships. We will focus on the heart's responses to past and present influences and address some foundational issues of worth, love, and trust. In Biblical counseling, you can expect practical & Biblical directions on how to live by faith, renew the mind, manage emotions, resolve the trauma of the past, and pursue peace in relationships.

Are you willing to operate according to this counseling philosophy? Yes No

Nature of Employment:

Periodic Evaluations/At-Will Arrangement: Foundations engages in periodic evaluations of all staff to ensure that the interests of Foundations, the staff, and all clients are satisfied. The nature of employment is at-will and may be terminated by either the staff or Foundations at any time. However, ethical considerations must be made regarding referring and/or terminating clients. Thus, Foundations require counselors to give at least two weeks' notice before terminating employment if they are currently seeing clients.

I understand and agree to these terms.

Signature: _____ **Date:** _____

NON-COMPETE CLAUSE

Counselor agrees to respect the confidentiality of Foundations Christian Counseling Services, Inc’s trademarks, client information, etc., and not to disclose them to any person, church, or organization while employed or upon resignation / termination.

Counselor agrees not to use, copy, or use any forms or other information developed by Foundations Christian Counseling Services, Inc. if employed by a competitor of Foundations Christian Counseling Services, Inc. without the approval of Foundations Christian Counseling Services, Inc.’s Director.

Counselor agrees not to set up business as a direct competitor of Foundations Christian Counseling Services, Inc. within a radius of 30 miles of any satellite office of Foundations Christian Counseling Services, Inc. during employment, and for an 18-month period following the expiration or termination of employment.

Signature

Date

I certify that all information provided in this application and any attachments are true and complete. I understand that any false information or omission may disqualify me from further consideration for employment or, if I am accepted, may result in my dismissal from employment if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making an informed decision. I release such persons and organizations from legal liability in making such statements. I understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time. If accepted as staff, I understand that I have been brought on at the employer's will and that my employment may be terminated at any time, with or without cause and with or without notice. I understand that no employee or representative of Foundations Christian Counseling Services, other than the Executive Director, has any authority to enter into any agreement for employment for a specified period of time or to make any agreement contrary to the foregoing. Further, the Executive Director may not alter the at-will nature of the employment relationship unless done so specifically and in writing.

I have read, understand and consent by my signature to these statements.

Signature: _____ **Date:** _____