



910 Boylston Street, Chestnut Hill, MA 02467

APPLICATION FOR EMPLOYMENT
Assistant Director of Christian Science Nurses Training

To Applicant: Thank you for your interest in serving at Chestnut Hill Benevolent Association. Please provide us with the information requested below. Please print or type. If you wish to elaborate on any point, please use a separate sheet.

Name _____
first middle last today's date

Address _____
number street
city state zip code

Telephone _____ (home) _____ (business)

Cell phone _____ email address _____

AVAILABILITY TO SERVE: Please indicate any periods during the year when you would not be available to be called to serve at the CHBA and/or any other considerations we need to know regarding your availability for a call to serve.

Have you applied before? Yes____ No____ If yes, when?_____

Are you willing to work weekends and/or holidays? _____

CHURCH DATA*

Are you currently listed as a Christian Science nurse in *The Christian Science Journal*? Yes____ No____

If yes, how long have you been listed?_____

What year did you join The Mother Church?_____ Former religion, if any _____

Membership number _____ How long have you studied Christian Science?_____

Branch Church of Christ, Scientist, where you are presently a member _____

How long have you been an active branch church member?_____

Do you own and study the Bible as well as *Science and Health with Key to the Scriptures*, *Prose Works*, and the *Church Manual* by Mrs. Eddy and use concordances to aid in your study of these works? Yes____ No____

To which Christian Science periodicals do you subscribe? _____

Do you rely solely on Christian Science for healing? Yes____ No____

Are you living in accord with the moral and spiritual standard of Christian Science, including being free from use of liquor, tobacco, drugs, and medication? Yes____ No____

REFERENCES: List two Christian Scientists (other than relatives), at least one of whom is a fellow Christian Science nurse who has worked with you, and who can comment on your character, your practice of Christian Science, and your experience in Christian Science nursing.

Name of CSN	Address	Daytime phone
-------------	---------	---------------

Name of second reference	Address	Daytime phone
--------------------------	---------	---------------

EMPLOYMENT HISTORY AS A CHRISTIAN SCIENCE NURSE: Begin with most recent employment. If you were not working in a facility, write "private duty" on the line where the name of the facility is requested.

1. Facility name _____ Employed from _____ to _____

Address _____

Supervisor's name _____ Phone _____

Your position _____ Duties _____

Reason for leaving _____

May we contact this employer? Yes____ No____

2. Facility name _____ Employed from _____ to _____

Address _____

Supervisor's name _____ Phone _____

Your position _____ Duties _____

Reason for leaving _____

May we contact this employer? Yes____ No____

OTHER RELEVANT CHRISTIAN SCIENCE NURSING EXPERIENCE

Describe other experience in Christian Science nursing that is not covered above. Use an additional sheet if needed. If appropriate, give names of people we could contact, their position, and current phone number.

EDUCATION/TRAINING

Year you took Primary class instruction in Christian Science _____

Christian Science teacher's name _____

May we contact your teacher? Yes _____ No _____ Contact phone number _____

Christian Science Nursing Training

List Christian Science nursing courses you have had, mentoring experience, and any other Christian Science nurses training you have completed:

Course/mentoring/training	Where taken	Year completed
_____	_____	_____
_____	_____	_____
_____	_____	_____

Academic

Languages you speak fluently: _____

OTHER RECENT WORK EXPERIENCE: Begin with most recent employment

1. Company name _____ Employed from _____ to _____

Address _____

Supervisor's name _____ Phone _____

Your position _____ Duties _____

Reason for leaving _____

May we contact this employer? Yes _____ No _____

2. Company name _____ Employed from _____ to _____

Address _____

Supervisor's name _____ Phone _____

Your position _____ Duties _____

Reason for leaving _____

May we contact this employer? Yes _____ No _____

Have you worked in a medical profession within the past 5 years? If so, in what capacity?

CHRISTIAN SCIENCE HEALING

Please describe a Christian Science healing you have experienced.

How long have you been a Christian Science nurse? What led you to become a C.S. nurse?

Please share what has led you to apply for this position.

Please share what experience you have had with mentoring and/or instructing (whether in Christian Science nursing or in another field).

PLEASE READ THE FOLLOWING AGREEMENT CAREFULLY

* The Chestnut Hill Benevolent Association may by law apply the test of religious qualification to its employment policies. Those who meet this requirement and are otherwise qualified will be hired, promoted, and transferred without regard to their race, color, creed, national origin, sexual orientation, gender identity, ancestry, sex, age, disability or genetic information*, veteran status, military service, and any other protected class.

**Massachusetts General Laws c.151B defines "genetic information" as any written record or explanation or explanation of a genetic test of a person's family history with regard to the presence, absence or variation of a gene. A genetic test is broadly defined as "any test of DNA, RNA, mitochondrial DNA, chromosome or proteins for the purpose of identifying genes or genetic abnormalities." The law expressly excludes drug and alcohol tests from the definition, meaning that employers may continue to conduct such tests in accordance with existing legal requirements.*

These new statutory provisions specifically prohibit employers from (1) terminating or refusing to hire individuals on the basis of genetic information; (2) requesting genetic information concerning employees, applicants or their family members; (3) attempting to induce individuals to undergo genetic tests or otherwise disclose genetic information; (4) using genetic information in any way that affects the terms and conditions of an individual's employment; or (5) seeking, receiving or maintaining genetic information for a non-medical purpose.

Nothing on this application is intended to create or imply a contractual relationship. All employment with the Chestnut Hill Benevolent Association is at-will, which means that the employer or employee may terminate employment at any time with or without cause. Applicants also acknowledge that they are not being employed for any specific term.

The applicant understands that consideration for employment is conditioned upon the results of a reference check, and that the employer is authorized to investigate all statements made by the applicant on the application and to contact former employers and references.

It is expected that all applicants are able to perform the essential functions of the position for which they apply. Reasonable accommodation will be made for qualified individuals with disabilities to the extent required by law.

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

Hiring is contingent upon our receipt of appropriate documentation of your eligibility for employment in the United States.

Please sign below to affirm that the information provided is true and to acknowledge that you have read the above information and agreement carefully.

Signature

Date