Love's Provision A Christian Science Nursing Service

Application for Employment as a Christian Science Nurse

Thank you so much for your interest in being a Christian Science nurse for Love's Provision in Kansas City, MO and the surrounding areas. Please print when filling out this form. If you need more space for any of the questions, please attach a separate piece of paper.

*Please attach a cover letter and your current resume when completing your application.		
Name: (first middle last)	Date	
Address: (number street city state zip)		
Home phone:		
Cell phone:		
Email address:		
Please initial that we have your permission to perform credit and	background checks	
U.S. Citizen? If the U.S. is not your country of citizensh to work in the U.S.?		
Languages you speak fluently:		
When would you be available to start?		
This is a full-time job, involving you being on call. Are you willing t		
Are you comfortable driving in all weather conditions?		
Do you have dependable transportation?		
Are there any considerations we need to know regarding your abi	lity to respond to a call to serve?	
Church:		
Are you a member of The Mother Church?		
Are you a member of a Branch Church of Christ, Scientist?		
Which one?		
What positions/duties do you hold at church?		

How long have you been an <u>active</u> branch church member?
How long have you studied Christian Science?
Year you took Primary Class instruction in Christian Science:
Christian Science Teacher:
May we contact your teacher? Teacher's phone number:
Do you rely radically on Christian Science for healing? (Art. IV, Sec. 1 of the Church Manual)
What citations or verses in the Bible and Mary Baker Eddy's writing have you found most helpful in your practice of Christian Science?
How do you endeavor to daily demonstrate Christian Science as taught in the scriptures and Science and Health with Key to the Scriptures?
Are you living your life in accord with the moral and spiritual standard of Christian Science, including being free from the use of alcohol, tobacco, drugs, and medication?
Christian Science Nursing:
Are you currently listed in the <i>Journal</i> as a Christian Science nurse?
If no, please explain:
How long have you been listed?
What inspired you to become a Christian Science nurse?
How long have you been a Christian Science nurse?
Please share your goals in pursuing this ministry:

References:

List three Christian Scientists that can serve as a personal reference and your practice of Christian Science. (At least one should be a Christian Science Practitioner). Please do not list relatives.

1. Name:	Address:
Phone number:	Email address:
2. Name:	Address:
Phone number:	Email address:
3. Name:	Address:
Phone number:	Email address:
List two Christian Science nurse experience and ability in Christia	s that have worked with you in the past and can comment on your an Science nursing.
1. Name:	Address:
Phone number:	Email address:
2. Name:	Address:
Phone number:	Email address:
Employment History as a	a Christian Science Nurse:
Begin with your most recent em write "private duty" instead.	ployment. If you were not working at a Christian Science organization,
1. Organization/Facility Name: _	
Address:	
Supervisor's name:	
Your position:	Duties:
Reason for leaving:	
If no inlease explain:	

2. Organization/Facility Name:	Employed from	to
Address:		
Supervisor's name:	, A	
Your position: Duties:		
Reason for leaving:	0.00	
May we contact this employer?		
If no, please explain:		
Other Christian Science nursing experience:	w	
		
Education/Training:		
Christian Science Nurses' Training:		
List Christian Science nurses' courses you have taken, mentoring Science nurses' training you have completed:	ng experience, and any	other Christian
Course/mentoring/training	Where taken	Year completed
		,
		<u> </u>

College Degrees/Experience Outside of Christian Science Nursing: Graduation Date Degree Earned Vocational/Technical School: **Recent Non-Christian Science Nurse Work Experience:** Start with the most recent employer. 1. Company name: _______ to-_____ tro-_____ Supervisor's name: ______ Phone: _____ Supervisor's email: Your position: _____ Duties: _____ Reason for leaving: May we contact this employer? If no, please explain: 2. Company name: ______ -to-_____ Supervisor's name: ______ Phone: _____ Supervisor's email: Your position: _____ Duties: ____ Reason for leaving:

May we contact this employer?

If no, please explain:
Have you worked in the medical field? If yes, in what capacity? -
Christian Science Healing Ministry:
Please share a recent healing you have had in Christian Science:
Please share a healing a patient had while you were on the case:
N P. falls la
Name Printed:
Signature:
Date:

May 5, 2020