

APPLICATION FOR CSNA I

(CS required)



SUNLAND'S MISSION STATEMENT

The mission of Sunland Home Foundation is to provide our community with a haven for healing while providing the highest standard of Christian Science nursing care supported by the practice and demonstration of Christian Science.

These services shall be consistent with ARTICLE VIII, Section 31, of the *Church Manual of The Mother Church, The First Church of Christ, Scientist, in Boston, Massachusetts*, by Mary Baker Eddy.

PERSONAL INFORMATION

Date _____

Name (First, Middle, Last)			
Address			
City	State	Country	Zip Code
Phone #	Cell Phone #	Are you under the age of 18?	
Email Address			
Are you willing to uphold Sunland's Mission Statement as given above? <input type="checkbox"/> Yes <input type="checkbox"/> No Please comment:			
If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No			

GENERAL INFORMATION

Please describe in detail special training and skills you have which would benefit Sunland home.
Fluent languages (spoken and written):
Person(s) to notify in case of an emergency:

EDUCATION Highest grade completed: **6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16**

NAME & LOCATION OF SCHOOL	MAJOR STUDY	YEARS ATTENDED

EXPERIENCE & EMPLOYMENT REFERENCES

If hired, would you have a reliable means of transportation to and from work? Yes No

MONTH & YEAR	NAME, ADDRESS, PHONE # OF EMPLOYER	POSITION	REASON FOR LEAVING
From			
To			
From			
To			
From			
To			
From			
To			

PERSONAL REFERENCES

Please list below two current personal references who know you well, but are not a relative or employer.

Name (First, Last)			Relation	
Address			Phone #	
City	State	Country		Zip Code
Email Address				
Name (First, Last)			Relation	
Address			Phone #	
City	State	Country		Zip Code
Email Address				

RELIGIOUS DATA

Sunland Home Foundation may, by law, apply the test of religious qualification to its training and employment policies. Those who meet this requirement and are otherwise qualified will be hired, promoted, and transferred without regard to their race, national origin, sex, color, age, or handicap.

Are you a member of The Mother Church? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a member of a branch church or society? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which one:
On which church/society committees are you currently serving?
Do you rely radically on Christian Science for healing? (See Art. IV, Sec. 1, of the <i>Church Manual</i> .) <input type="checkbox"/> Yes <input type="checkbox"/> No

1. How did you learn about Christian Science and for how long have you been practicing Christian Science?

Former religion, if any _____

2. Do you study the Bible Lesson on a daily basis? _____

3. Do you own and use the *Bible* and *Science and Health, Prose Works*, and the *Church Manual* by Mrs. Eddy, as well as concordances to the *Bible*, Mrs. Eddy's writing and the *Christian Science Hymnal*?

4. Do you subscribe to the Christian Science periodicals? _____

5. Have you had Primary Class? _____ If yes, please give the year in which you had Class, your teacher's name, current address and telephone number, if applicable:

6. Do you regularly attend Association meetings? _____ If not, please share your understanding of why Mrs. Eddy made provision for Primary Class Instruction.

7. Do you rely radically on Christian Science for healing (no drugs, vitamins, etc.)? (See Art. IV, Sec. 1, of the *Church Manual*)

8. Morality is essential in Christian Science practice. (SH, 57:1) What is your understanding of the Christian Science standard of morality?

Your Calling to Christian Science Nursing

9. Do you presently have a nurturing role in your family? If yes, please describe.

10. Please give specific examples from your experience of ways you are currently fulfilling the *Church Manual* By-Law “Christian Science Nurse” and expressing the qualities that Mrs. Eddy describes in *Science and Health*.

11. What have you learned from your experience of caring for others?

Training in the Christian Science Nursing Arts

12. What motivates you at this time to take the CSNA I class?

13. How will this course help you express more fully the *Church Manual By-Law "Christian Science Nurse"* and the qualities of the Christian Science nurse as specified by Mrs. Eddy in *Science and Health*, pg 395:17-20?

14. We are very interested in your healing work as an expression of "a demonstrable knowledge of Christian Science practice". See Article VIII, Section 31, of the *Church Manual*.) Please attach with this application two (2) written testimonials of healings— including one recent physical healing. One report should present a healing in which you acted as the practitioner, either for yourself or another.

Please Read Carefully, Initial Each Paragraph and Sign Below.

_____ I hereby certify that I understand the company is an at-will employer.

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between and the company. In addition, I understand and agree that if I am employed, my employment is for definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

Applicant's Signature

Date