

 HOUSE OF **HIS** CREATION

301 N. Broad Street, Lititz PA 17543  
717-626-0263

Application for Employment  
Houseparents

**Section I: Personal Information**

Today's Date \_\_\_\_\_

\_\_\_\_\_  
Husband's Full Name Birthdate Birthplace

\_\_\_\_\_  
Wife's Full Name Birthdate Birthplace

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Home Phone Husband's Work/Cell Phone Wife's Work/Cell Phone

Have you been married previously? \_\_\_\_\_ If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Number Of Children \_\_\_\_\_ Other Dependants \_\_\_\_\_

\*Live-in accommodations are for a married couple, dependent children living with you will be considered case by case.

Please list each child's name, age, grade, & birthplace:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Please include a detailed resume of education and work experience. [Husband & Wife]

**Section II: Financial Information**

Present Salary: Husband \_\_\_\_\_ Wife \_\_\_\_\_

Other means of support, if any: \_\_\_\_\_

Do you own or rent your home/apartment? \_\_\_\_\_

Please list indebtedness, including amount owed, monthly payments, and when debt will be paid off:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How much would you need to make as a couple to make ends meet (this position includes room, board, and salaries see job description)? \_\_\_\_\_

How do you feel about "living on faith" for provision of your daily needs [HOHC is 100% donor supported]?

\_\_\_\_\_

**Section III: Christian Experience**

How long have you been a Christian? Husband \_\_\_\_\_ Wife \_\_\_\_\_

What is your definition of a Christian? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What does Christ mean to you in your daily life? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

May we contact your pastor as an additional reference? Yes \_\_\_\_\_ No \_\_\_\_\_

Church Name \_\_\_\_\_ Pastor's Name \_\_\_\_\_

Church Address \_\_\_\_\_

Church Phone \_\_\_\_\_ Denomination \_\_\_\_\_

How long have you attended? \_\_\_\_\_ Member? \_\_\_\_\_

Positions held in church, past & present: \_\_\_\_\_

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Have you been involved in any other parachurch ministries? \_\_\_\_\_

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What are your views concerning abortion? \_\_\_\_\_

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Would you recommend adoption for the child of a single mother? \_\_\_\_\_

Explain: \_\_\_\_\_

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What is your view of single parenting?

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What is your definition of discipleship? \_\_\_\_\_

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What is your understanding of trauma-informed care and being strengths based?

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#### **Section IV: Calling**

- A. Do you believe God has called you to full-time Christian work?  
If so, please explain your understanding of your call. Perhaps the following questions will help you to organize your thinking. Feel free to include other aspects.

When and under what circumstances did you first know definitely that you were called by God to this type of ministry? For example, did your call come through immediate awareness, a portion of Scripture, through someone's testimony, or other? Have you experienced anything that you have interpreted as a confirmation of your call? Have people close to you greatly encouraged (or discouraged) you to go ahead and fulfill your call? In either case (positive or negative), what has been your reaction?

**Section V: References**

Please give the name and complete address of four people who know your family well and at least 2 that know you in a professional setting (in addition to your pastor). No relatives please. Include complete name, address, and phone number.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

Part of the application process includes a reference from your employer, your pastor, and other references listed. We will not seek this information without your consent. Below you will find a Release of Information statement for this purpose.

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We understand that the House of His Creation may be soliciting information from our employers, our pastor and other references. This information will be used only to assist the House of His Creation in assessing our abilities as potential houseparents. We give our permission for the release of this information.

\_\_\_\_\_  
Husband's Signature

\_\_\_\_\_  
Wife's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**Section VI: Health Information**

Do you have any physical limitations? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Are you currently under a physicians care? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Are your children in good health? \_\_\_\_\_ If no, please explain: \_\_\_\_\_

\_\_\_\_\_

Are you physically able to perform house tasks? (cleaning & general maintenance are part of the job, use stairs to access the resident area and third floor living quarters as well as basement laundry)? \_\_\_\_\_

## **Section VII: Experience – Situation Response**

**What is your response to high demands:** example a donor knocks on the door, a volunteer has stopped by to assist with a project, a resident has a need to discuss and you have been discussing some personal things with each other that are not yet resolved?

**What is your understanding of walking alongside someone vs. leading them where you want them to go?**

**Would you say you have an ability as a couple to be present with others? Can you work through the balance of task and presence? What has that looked like in your household?**