

# Application for Employment

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

## Personal Information

Name \_\_\_\_\_

Address _____	City _____	State _____	Zip _____
Phone Number _____	Email Address _____		

## Position

Position you are applying for _____	Available Start Date _____	Desired Pay _____
-------------------------------------	----------------------------	-------------------

## Education

School Name	Location	Years Attended	Degree Received	Major

## Employment History

Name of Company \_\_\_\_\_ Position Held \_\_\_\_\_  
Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

Name of Company \_\_\_\_\_ Position Held \_\_\_\_\_  
Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

Name of Company \_\_\_\_\_ Position Held \_\_\_\_\_  
Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

Of the jobs you have held, which did you like the most and why?

Of the jobs you have held, which did you like the least and why?

--

	Yes	No
May we contact your present employer?		
Have you previously been employed by the Archdiocese or any of its institutions?		
Do you currently work at any other Archdiocesan location?		
Do you have any relatives who are employed by this organization?		
Please specify:		
Is there any information we would need about your name or use of another name for us to be able to check your work record		
Have you ever been convicted of a criminal offense? [Conviction is not necessarily a bar to employment]		
Please specify:		

How were you referred to our organization? \_\_\_\_\_

Please list any additional information that relates to your ability to perform the job for which you have applied - such as license, certification, training, professional memberships, etc.

--

### References (2 Employers + 1 Personal)

Name	Title	Company	Phone Number

### APPLICANT'S STATEMENT

I understand that the employer follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed unless the change is specifically authorized in writing. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand that certain positions may require the knowledge of or the practice of the Catholic faith. If this is a requirement, I will be told prior to employment.

I understand that the employer may thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

I certify that all statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Your Signature: \_\_\_\_\_

Date: \_\_\_\_\_