

Catholic Diocese of Salina Employment Application

Applicant Information

Full Name: _____ Date: _____
First Middle Last

Address: _____
Street Address Apartment/Unit #

Phone: () _____ E-mail Address: _____
City State Zip Code

Date Available: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you legally authorized to work in the U.S.? YES NO

Have you worked for the Diocese before? YES NO If so, when? _____

Have you been referred by a current employee? YES NO Name: _____

Can you perform the essential functions of the job with or without an accommodation? YES NO

What is your religious denomination? _____

What parish are you affiliated with? _____

Education

High School: _____ Address: _____

Did you graduate? YES NO

College: _____ Address: _____

Did you graduate? YES NO Subjects/Major _____

Technical School: _____ Address: _____

Did you graduate? YES NO Subjects/Major _____

List any other vocational training or special skills you may have: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full

Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full

Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Current Employment

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Wages
Per Hour/Annual \$ _____

Responsibilities _____

From: _____ To: _____ Reason for Leaving: _____

Previous Employment

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Wages
Per Hour/Annual \$ _____

Responsibilities _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Wages
Per Hour/Annual \$ _____

Responsibilities _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Wages
Per Hour/Annual \$ _____

Responsibilities _____

From: _____ To: _____ Reason for Leaving: _____

Criminal Background

Have you ever been convicted (misdemeanor and/or felony) of violating any laws?

Date: _____ Convicted for: _____ Status: _____ County: _____

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Date: _____ Convicted for: _____ Status: _____ County: _____

Please read carefully and initial each statement below before signing:

_____ I understand that the Diocese of Salina is a Roman Catholic religious organization and that all employees are expected to respect the values, teachings and morals of the Church.

_____ I give the Diocese permission to contact the references and employers listed or provided except where specifically indicated to the contrary.

_____ I understand that the Diocese is exempt from State Unemployment.

_____ I understand that as a condition of employment, I must provide proof of my legal right to work in the United States in accordance with the Immigration Act of 1986

_____ I understand that my employment is "At Will" and this employment application is not a contract of employment and that I, or the Diocese, can terminate my employment at any time, with or without cause or notice.

Disclaimer and Signature

"I certify that all the information I have provided above is true and complete and I understand that false statements or an omission of pertinent information on this application are grounds for dismissal whether learned of immediately or in the future."

Applicant Signature _____ Date: _____