

# St. Theodore's Catholic Church and School

*Inviting people to actively participate in the life of Jesus.*

## APPLICATION FOR EMPLOYMENT

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

Our policy is to provide equal employment opportunity to all qualified persons. Please complete the *Application for Employment* in its entirety and submit it to the Parish Office or send by mail to:

St. Theodore Parish  
308 E. Fountain Street  
Albert Lea, MN 56007

Last Name:	First Name:	Middle Initial:
Street Address:		
City:	State:	ZIP Code:
Telephone:	Social Security #:	

Position Applied for: \_\_\_\_\_

How did you hear of this opening: \_\_\_\_\_

Expected Salary Range: \_\_\_\_\_

Expected Start Date: \_\_\_\_\_

Are you a U.S. Citizen or otherwise authorized to work in the U.S> on an unrestricted basis:  Yes  No  
*You may be required to provide documentation.*

Are you looking for full-time employment  \_\_\_\_\_

part-time employment  (please specify) \_\_\_\_\_

Volunteer  (please specify) \_\_\_\_\_

Other  (please specify) \_\_\_\_\_

**EDUCATION:**

	<b>School Name and Location</b>	<b>Major/Degree</b>
High School		
College		
College		
Post-College		
Other training		

In addition to your work history, are there other skills, qualifications, or experience that we should consider:


**MILITARY:** *(Complete this section if you are/or have served in the U.S. Armed Forces)*

<b>Branch of Service:</b>	<b>Served from:</b>	<b>To:</b>
<b>Describe any special training:</b>		

**EMPLOYMENT HISTORY:** *(Start with most recent employer)*

<b>Company/Organization Name:</b>		
<b>Address:</b>		<b>Telephone #:</b>
<b>Date Started:</b>	Starting Wage:	Starting Position:
<b>Date Ended:</b>	Ending Wage:	Ending Position:
<b>Name of Supervisor:</b>		
May we contact: <input type="checkbox"/> Yes <input type="checkbox"/> No		
If "NO", why not:		
<b>Responsibilities:</b>		

<b>Company/Organization Name:</b>		
<b>Address:</b>		<b>Telephone #:</b>
<b>Date Started:</b>	Starting Wage:	Starting Position:
<b>Date Ended:</b>	Ending Wage:	Ending Position:
<b>Name of Supervisor:</b> May we contact: <input type="checkbox"/> Yes <input type="checkbox"/> No If "NO", why not:		
<b>Responsibilities:</b>		

<b>Company/Organization Name:</b>		
<b>Address:</b>		<b>Telephone #:</b>
<b>Date Started:</b>	Starting Wage:	Starting Position:
<b>Date Ended:</b>	Ending Wage:	Ending Position:
<b>Name of Supervisor:</b> May we contact: <input type="checkbox"/> Yes <input type="checkbox"/> No If "NO", why not:		
<b>Responsibilities:</b>		

**Attach additional information if necessary.**

St. Theodore Application for Employment

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This organization is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this organization is "at will", which means that either I or this organization can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, has any authority to alter the foregoing.

<b>Name:</b> <i>(Please print)</i>	
<b>Signature:</b>	<b>Date:</b>

***Please forward completed application form to:***

St. Theodore Parish  
308 E. Fountain Street  
Albert Lea, MN 56007