

DIOCESE OF STEUBENVILLE APPLICATION FOR EMPLOYMENT

**P
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R
S
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N
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Last Name First Middle

Street Address

City, State, Zip

Today's Date Home Phone Cell Phone

First Date Available to Work Last Date Available

What Days & Hours are you Available for work?

	Yes	No
Are you legally eligible for employment in the United States?	_____	_____

Have you been convicted of a crime in the past ten years excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by the court? If yes describe	_____	_____
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Special Training or Skills:

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Type of School	Name & Location of School	Course of Study	No. of Years Completed	Did You Graduate
College				
Business Trade Technical				
High School				
Elementary				

EMPLOYMENT HISTORY

Please give accurate, complete full-time & part-time employment record. Start with your present or most recent employer

Company Name

Telephone

Address

Employed From

Employed To

Name of Supervisor

Job Title

Describe Your Work

Reason For Leaving

Company Name

Telephone

Address

Employed From

Employed To

Name of Supervisor

Job Title

Describe Your Work

Reason For Leaving

Company Name

Telephone

Address

Employed From

Employed To

Name of Supervisor

Job Title

Describe Your Work

Reason For Leaving

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S**

Name

Phone Number

Address

E-mail

How do They Know You

Name

Phone Number

Address

E-mail

How do They Know You

Name

Phone Number

Address

E-mail

How do They Know You

Perspective employees will receive consideration without discrimination based on race, creed, color, sex, age, national origin, handicap, veteran status or condition prescribed by state or local law

Please read and understand this statement before signing your application:

The information I have provided in this Application for Employment is true, correct and complete. False, incomplete or misrepresented information of any kind. Will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the employer to contact and obtain information about me from previous employers, additional institutions and "references" I provided, and any other party necessary to verify the accuracy of information I disclosed in this application, a related employment resume or a personal interview. To assist in the processing of my Application, I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose.

This application will expire in 30 days. After that date, unless otherwise notified, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement. If I accept an offer of employment I understand I may resign at any time, and the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law.

I fully understand and accept all terms and conditions in the above statement.

Date

Signature