



Position for which you are applying _____ Date _____

Name _____
Last First Middle

Name _____
Street City State Zip Code

Home Telephone _____ Cell Phone _____

Email Address _____

Parish /School _____

Are you prevented from lawful employment in this country because of visa or immigration status?
(Proof of employment eligibility will be required upon employment) YES NO

Have you been convicted of a felony or release from prison for a felony in the last 10 years? YES NO

If YES, please explain: (please note that an affirmative response to the above question will not necessarily bar you from employment) _____

Are you at least 18 years old? YES NO

How did you hear about our opening _____
(please list specific notice)

EDUCATION/SKILLS:

	Name & Address of School	Course of Study	Last year Completed (1 2 3 4)	Graduate?	Diploma or Degree
High School				Yes No	
College				Yes No	
Graduate School				Yes No	

We are an equal Opportunity employer and fully comply with the Americans with Disabilities Act. Accommodations for persons with disabilities will be provided unless the accommodations would place an undue hardship on the employer. Persons needing accommodations should notify the Organization.

Other Training/Education Skills:

Previous Experience:

Please list name, address and phone number of previous employment, military or volunteer experience with most recent first.

1. Name of Organization _____ From _____ To _____
Address _____
Phone Number _____ Supervisor _____
Status: _____ Volunteer _____ Full Time Paid _____ Part Time Paid _____
Job Title _____ Current/Ending Pay \$ _____
Duties and Responsibilities _____
Reason for Leaving _____
Name known (if different than present name) _____

2 Name of Organization _____ From _____ To _____

Address _____

Phone Number _____ Supervisor _____

Status: _____ Volunteer _____ Full Time Paid _____ Part Time Paid _____

Job Title _____ Current/Ending Pay \$ _____

Duties and Responsibilities _____

Reason for Leaving _____

Name known (if different that present name) _____

3 Name of Organization _____ From _____ To _____

Address _____

Phone Number _____ Supervisor _____

Status: _____ Volunteer _____ Full Time Paid _____ Part Time Paid _____

Job Title _____ Current/Ending Pay \$ _____

Duties and Responsibilities _____

Reason for Leaving _____

Name known (if different that present name) _____

4. Name of Organization _____ From _____ To _____
Address _____
Phone Number _____ Supervisor _____
Status: _____ Volunteer _____ Full Time Paid _____ Part Time Paid _____
Job Title _____ Current/Ending Pay \$ _____
Duties and Responsibilities _____

Reason for Leaving _____
Name known (if different than present name) _____

May we contact your present employer? YES NO (Please note that it may be necessary to contact your current employer prior to an offer of employment. If you check NO, you will be notified prior to us contacting your current employer.)

REFERENCES:

Give name, address, telephone, and email of three references who are not related to you and are not previous supervisors. Please do indicate the relationship to this person.

1. _____

2. _____

3. _____

SIGNATURE, RELEASE AND CONSENT:

I hereby certify that all information provided by me on this employment application and all other information provided by me in the course of applying for employment with the Diocese of Reno is truthful, accurate, and complete.

I understand that if any information provided to me on this employment application or any other information provided by me in the course of applying for employment with the Diocese of Reno is found to be false, untruthful, misleading, or incomplete that such will be cause for immediate rejection of my application for employment.

I further understand that if I am hired as an employee in the Diocese of Reno and at any time thereafter i is discovered that any information provided by me on this employment application or any other information provided by me in the course of applying for employment with the Diocese of Reno is found to be false, untruthful, misleading, or incomplete shall be sufficient cause for disqualification or dismissal from employment.

I hereby authorize the Diocese of Reno to obtain information relating to my current and previous employment, education, criminal or personal history records. I agree to release the Diocese of Reno, its employees, representatives, and agents from any and all liability claims or damages for the obtaining and us of information obtained from these sources or developed as a result of contacting these sources.

I hereby authorize any and all organizations, including but not limited to my current or previous employee educational institutions, etc., their employees, representatives, and agents to provide any and all information regarding my employment or education to the Diocese of Reno, its employees, representatives, and agents from any and all liability claims or damages that may directly or indirectly result from the use, disclosure, release or omission of any such information by and person or party, whether such information is favorable unfavorable to me. A photocopy of this release will be valid as an original even though the photocopy does not contain an original writing of my signature.

I hereby certify that I have read and understand the above.

Signature

Date

ATTENTION APPLICANT: This application will be kept under active consideration for no more than thirty days from the date of application as shown on the front page.