



## Employment Application

The Diocese of Baton Rouge Child Nutrition Program is an Equal Opportunity Employer. We are committed to attracting, retaining, developing and promoting the most qualified employees without regard to race, color, religion, sex, national origin, age, disability, genetic information or any other characteristic prohibited by applicable law. We are dedicated to providing a work environment free from illegal discrimination and harassment, and where employees are treated with respect and dignity.

### Applicant Information

Full Name: \_\_\_\_\_  
First Middle Last Suffix

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

What position are you applying for? \_\_\_\_\_

Date available for work if hired: \_\_\_\_\_ Desired hours (full or part time): \_\_\_\_\_

Desired pay rate: \_\_\_\_\_

If hired, can you submit verification of your legal eligibility to work in the United States? YES  NO

Are you currently working in the Diocese? YES  NO   
If yes, please list location, position, and date of hire: \_\_\_\_\_

Have you ever worked in a Diocesan location? YES  NO   
If yes, please list location, position, and date of hire: \_\_\_\_\_

Do you have any relatives working at the Diocese of Baton Rouge Child Nutrition Program? YES  NO   
If yes, please list their name(s), positions(s), and location(s): \_\_\_\_\_

Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodation? YES  NO

NOTE: Answering "yes" to the following two questions does not constitute an automatic bar to employment. Factors such as the date of offense, seriousness and nature of the violation and position applied for will be taken into account.

Have you ever been convicted of or pled guilty or no contest to a felony or misdemeanor? YES  NO   
If yes, when, where and what was the disposition of the case: \_\_\_\_\_

Have you ever been arrested for physically, sexually or emotionally abusing a child or adult? YES  NO   
If yes, please explain: \_\_\_\_\_

## Educational History

*Educational History should include high school and later*

School Name & Complete Mailing Address	Type of School (high school, college, trade school, etc.)	Name of Degree or Program	Degree/Program Completed? (Y or N)

## Professional Work References

*Please list the two individuals most familiar with your qualifications and skills. Do not list relatives or supervisors already identified on this application.*

Name	Title	Relationship to Applicant	Telephone and Email	Number of years known

List any additional skills, licenses, certificates, education and training that are relevant to the position for which you are applying:

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## Employment History

May we contact your current employer?

YES

NO

Start with current employer & indicate employment history for the last 5 years. If current employment, list end date as current.

Dates of Employment (mm/yy – mm/yy)	Company Name & Address (City, State, Zip)	Immediate Supervisor (Name and Phone Number)	Position held/Job Description	Reason for Leaving Position

\_\_\_ Check here if you have no employment history. If checked, proceed to next section.

Please explain any gaps in employment history other than those due to personal illness, injury or disability:

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**Applicant Statement**

*I certify that all information I have provided in order to apply for and secure work with the Diocese of Baton Rouge Child Nutrition Program is true, complete and correct.*

*I expressly authorize, without reservation, the Diocese of Baton Rouge Child Nutrition Program, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the Diocese of Baton Rouge Child Nutrition Program, its representatives, employees and agents for seeking, gathering and using such information in the employment process and all other persons, entities, or organizations for furnishing such information about me.*

*I understand that the Diocese of Baton Rouge Child Nutrition Program does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable law.*

*If I am hired, I understand that employment is at-will. I understand that I am free to resign at any time, with or without cause and without prior notice, and the Diocese of Baton Rouge Child Nutrition Program reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required or prohibited by applicable law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that any handbooks, manuals, policies and procedure maintained by the Diocese of Baton Rouge Child Nutrition Program are not contractual in nature and may be amended or abolished at the sole discretion of the Diocese of Baton Rouge Child Nutrition Program. I understand that no supervisor or representative of the Diocese of Baton Rouge Child Nutrition Program is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Diocese of Baton Rouge Child Nutrition Program's authorized representative.*

*I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 in this regard.*

*I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect will be sufficient cause to 1) cancel further consideration of the application, or 2) immediately terminate my employment whenever it is discovered.*

*This application shall be considered active for a period of time not to exceed 90 days.*

**DO NOT SIGN UNTIL YOU HAVE READ THE FOREGOING APPLICANT STATEMENT.**

**I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.**

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

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

# AUTHORIZATION TO OBTAIN BACKGROUND INFORMATION

The Diocese of Baton Rouge Child Nutrition Program appreciates your willingness to share your talents and skills. Providing safe and secure programs for our employees and customers is of utmost importance to us. In the pursuit of providing safe and secure programs, we require, as a condition of employment, and/or continued employment, that all applicants consent to and authorize verification of the background information submitted on their application for employment.

I, the undersigned applicant, declare that all statements contained in my application for employment are true and that any misrepresentation or omission is cause for rejection of my application or termination of employment. I agree to observe all of the guidelines and policies for the program in which I am applying. I hereby authorize the Diocese of Baton Rouge Child Nutrition Program to conduct a personal and professional background check for the purposes of my application with the Diocese of Baton Rouge Child Nutrition Program. I understand that the Diocese of Baton Rouge Child Nutrition Program may contact any references, past and current employers or agencies, and any individual or organization which might be relevant to my desired position. I do hereby agree to forever release and discharge all of the above stated persons and entities providing such information from any and all claims and damages connected with their release of any requested information.

I do hereby agree to forever release and discharge the Diocese of Baton Rouge Child Nutrition Program, its representatives, employees, agents, and any related agencies and their associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs and expenses, or any other charge or complaint filed with any court or agency arising from the retrieving and reporting of information. I understand that a criminal background check will be conducted prior to and during my employment. I hereby give complete permission for the Diocese of Baton Rouge Child Nutrition Program to conduct a criminal background check, an arrest records check, abuse registry check, and/or driving record check as applicable to the position for which I am applying. I authorize investigations of all statements contained in my application.

I understand that the Diocese of Baton Rouge Child Nutrition Program has ZERO TOLERANCE FOR ABUSE and takes all allegations of abuse seriously. I further understand that the Diocese of Baton Rouge Child Nutrition Program cooperates fully with governmental authorities to investigate all cases of alleged abuse. Abuse of minors or vulnerable adults is grounds for immediate termination and possible criminal charges. I understand and agree that false statements and/or omissions regarding past conduct and/or present situations may be grounds for denial of my application or termination of employment and that refusal to inform the Diocese of Baton Rouge Child Nutrition Program of the contents of a sealed criminal record will result in the automatic denial of my application or termination of employment. I understand and agree that information may be obtained from sources that I provided and that this information will be held confidentially by the Diocese of Baton Rouge Child Nutrition Program, to the extent permitted by applicable law. I have also read and understand the above stated information within this authorization and am signing below of my own free will. I understand that I can withdraw from the application process at any time. I agree that any copy of this document is as valid as the original.

My signature indicates that I have read and understand the above. **Do not sign until you have read the above statements.**

Applicant Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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

Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

If driving is an essential function of the position, also provide the following:

Driver's License: State \_\_\_\_\_ License Number \_\_\_\_\_

Date of Birth: Month \_\_\_\_\_ Date \_\_\_\_\_ Year \_\_\_\_\_ (required for background check)

Have you ever worked under a different name? YES  NO

If yes, please list names: \_\_\_\_\_

At any time in the last 5 years have you lived in a different state (within the United States) or do you currently live outside the state of Louisiana? YES  NO

If yes, what state(s) did you live in? \_\_\_\_\_

## A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.ftc.gov/credit](http://www.ftc.gov/credit) or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”).

You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- a. a person has taken adverse action against you because of information in your credit report;
- b. you are the victim of identity theft and place a fraud alert in your file;
- c. your file contains inaccurate information as a result of fraud;  
you are on public assistance;
- d. you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit).

- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:**

#### **TYPE OF BUSINESS/ CONTACT:**

Consumer reporting agencies, creditors and others not listed below Federal Trade Commission: Consumer Response Center - FCRA  
Washington, DC 20580 1-877-382-4357

National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)

Office of the Comptroller of the Currency  
Compliance Management, Mail Stop 6-6  
Washington, DC 20219 800-613-6743

Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)  
Federal Reserve Consumer Help (FRCH)

P O Box 1200  
Minneapolis, MN 55480  
Telephone: 888-851-1920

Website Address: [www.federalreserveconsumerhelp.gov](http://www.federalreserveconsumerhelp.gov)  
Email Address: [ConsumerHelp@FederalReserve.gov](mailto:ConsumerHelp@FederalReserve.gov)

Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)  
Office of Thrift Supervision

Consumer Complaints  
Washington, DC 20552 800-842-6929

Federal credit unions (words "Federal Credit Union" appear in institution's name)  
National Credit Union Administration  
1775 Duke Street

Alexandria, VA 22314 703-519-4600

State-chartered banks that are not members of the Federal Reserve System

Federal Deposit Insurance Corporation  
Consumer Response Center, 2345 Grand Avenue, Suite 100  
Kansas City, Missouri 64108-2638 1-877-275-3342

Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission  
Department of Transportation, Office of Financial Management  
Washington, DC 20590 202-366-1306

Activities subject to the Packers and Stockyards Act, 1921 Department of Agriculture  
Office of Deputy Administrator - GIPSA  
Washington, DC 20250 202-720-7051