Roman Catholic Diocese of Dallas Employment Application

This form is not complete until a Diocesan Screening Form has been submitted.

We request the following information to help us make the best possible placement. You should complete all portions of this application that pertain to you. We appreciate the time you spend in completing this form.

Name			Goe	es By				
LAST	FIRST	MIDDLE		J				
Home Telephone No	ome Telephone No Alternate Telephone No							
Address:STREET								
TO 3 ('1 A 11			TY STA	ATE	ZIP CODE			
Are you a United States citizen or alien legally authorized to work in the United States? Yes No								
Have you ever filed an application with us before? □ Yes □ No								
If Yes, please give date and location:								
Have you ever been employed with us before? □ Yes □ No								
If Yes, please give date, location and reason for leaving:								
Referred to the Catholic Diocese by:								
Position Applying For: Salary Desired:								
Employment Preference: ☐ Full time ☐ Part time - Date available								
☐ Summer ☐ Temporary - Dates/Hours available								
Education - Training	5							
	Name and A	Address	Major/Subject/Cour /Degree	rse	Circle Year	Did You Graduate?		
			Degree	Co	ompleted	Graduate:		
High School				1	2 3 4	□Yes□No		
College				1	2 3 4	□Yes□No		
Graduate Studies				1	2 3 4	□Yes□No		
Other (Specify)				1	2 3 4	□Yes□No		
			1			1		

Please list below present and past employment, to include military service, **beginning with the most recent.** Please complete *all* items and be specific. If you have a resume, please attach it to the application.

Company	Address		Telephone		
Dates Employed	Final Weekly	Name o	Name of Supervisor		
From: To:	Pay:	Trume o	1 Supervisor		
Your Title	Your Duties				
Reason for Leaving					
	Address		Telephone		
2 Company	Address		rerephone		
Dates Employed	Final Weekly	Name o	Supervisor		
From: To:	Pay:				
Your Title	Your Duties				
Reason for Leaving					
Reason for Leaving					
3 Company	Address		Telephone		
Dates Employed	Final Weekly				
From: To: Your Title	Your Duties	Pay: Vour Duties			
Tour Title	Tour Duites				
Reason for Leaving					
	ent history is more	than three com	nanias		
	additional informa	-	•		
May we contact the above	employers and/or school		e checking purposes?		
Please identify any employ	ver you do not wish for	us to contact by num	lber?		
Skills: (Check those that yo	u are proficient	in.		
☐ Ten Key by Touch	Г	Microsoft Office	(Current Versions)		
	0	Microsoft Office (Current Versions)			
☐ Minimum Typing of 5		o Word			
□ Other		o Excel			
		o Access			
		 Publisher 			
		o PowerPoint			
		 Outlook 			

References: Please list names, addresses and phone numbers of three (3) references including: most recent supervisor (this is required if applicant is transferring from one diocese entity to another), past employer, and a personal reference. Other Information: Driver's License #_____ State____ Expires____ Have you ever been convicted of a felony? ☐ Yes ☐ No If yes, provide details, dates, places, matter of offense and results. Has bond or security clearance ever been denied or canceled? ☐ Yes ☐ No If yes, please explain. PLEASE READ CAREFULLY BEFORE SIGNING The Roman Catholic Diocese of Dallas is an equal opportunity employer and all qualified applicants will receive consideration for employment without any form of discrimination prohibited by Federal or State Laws. No information on this application will be used for the purpose of discrimination. I understand that receipt of this application by the Roman Catholic Diocese of Dallas does not guarantee a job interview or offer of employment. I agree to and understand that I must submit to and pass a background and reference check if offered employment. I voluntarily grant the Roman Catholic Diocese of Dallas the right to investigate and verify the information statements I have provided in this application and I further authorize all law enforcement, credit companies, educational institutions, employers and similar persons and entities to furnish the Roman Catholic Diocese of Dallas information about me. I hereby release the Roman Catholic Diocese of Dallas and its representatives from any and all liability for seeking and using such information and further release the disclosing persons or entities from any and all liability for furnishing such information. I understand the employment that may be offered is at will and is not guaranteed for any particular length of time and that both the Roman Catholic Diocese of Dallas and I remain free to terminate the relationship at any time, either with or without cause or with or without notice. I understand that no representative of the Roman Catholic Diocese of Dallas has the authority to make any assurance to the contrary. In the event of employment, I agree to conform to the rules and regulations of the Roman Catholic Diocese of Dallas. This application will be considered for a period of sixty (60) days and any position sought with the Roman Catholic Diocese of Dallas subsequent to that time will require a new application. I certify that the statements I have made on this application are true and correct. I understand that such information will be relied upon in considering my application for employment and that any

misrepresentation or omission of any statements made by me on this application is grounds for disqualification from further consideration or for immediate dismissal from employment.

APPLICANT'S SIGNATURE

DATE SIGNED