

CATHOLIC DIOCESE OF FORT WORTH

APPLICATION FOR EMPLOYMENT

AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER M/F/D/V

IMPORTANT, PLEASE READ

The Parish/Diocese does not discriminate in the recruitment, hiring and conditions of employment on the basis of race, sex, color, national origin, marital status, disability, age or veteran status. The Diocese of Fort Worth does reserve the right and in accordance with both Federal and Canon Law to consider religion and gender for some employment positions, including, but not limited to, clergy and other pastoral positions. No question on this application is intended to secure information to be used in a discriminatory manner. Your completed application will be reviewed carefully; but its receipt does not imply that you will be employed. Employment consideration necessitates that you meet all minimum qualifications required of the position for which you are applying. Incomplete answers on this application may result in no offer of employment.

This application is not only a factor in considering you for employment, but is also kept as a permanent record if employed by the Diocese. Please read over the data you have given with this point in mind and make certain that all of the requested information has been accurately and completely supplied. **To be valid, this application must be signed/e-signed and dated by you.**

READ CAREFULLY AND FULLY COMPLETE EACH SECTION

PERSONAL & POSITION INFORMATION			
Date of Application: (MM/DD/YYYY)	Legal Name: (Last, First, MI)	Other Names Used:	
Current Address: (Street, City, State, Zip Code)			
Email Address:	Cell/Home Phone Number:	Other Phone Number:	
What position(s) are you applying for:		Position Location Name:	
Your Parish/Church Affiliation:		Start date of availability, if offered a position:	
Desired Annual Salary: \$		Least Acceptable Desired Annual Salary: \$	

Have you ever worked for this Diocese before? Yes No If "Yes", where and when? _____

If employed by the Diocese and you are under 18 years of age, can you furnish a work permit? Yes No

Are you presently legally authorized to work in the United States? Yes No

Have you ever been convicted of or plead nolo contendere to a violation of the law, other than a minor traffic violation?

Yes No

If so, when, where, and what was the disposition of the case?

If required by the job, are you willing to travel?

Yes No

Can you perform the essential functions of the job with or without reasonable accommodation?

Yes No

Are you willing to work weekends? Yes No

Are you willing to work overtime?

Yes No

Are you available to work (check all that apply): Full-Time Part-Time Occasional

Have you ever been discharged from a job or been requested to resign?

Yes No

If "Yes", please explain:

Please list the names of any friends or relatives who are currently employed by the Diocese?

How did you hear about the position (i.e., internet job board, Diocesan website, friend, present employee, etc.)?

EDUCATION

School	Name & Location of school	Field of Study	Did you Graduate?	Degree or Diploma
High			Yes <input type="checkbox"/> No <input type="checkbox"/>	
College			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Graduate School			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Other			Yes <input type="checkbox"/> No <input type="checkbox"/>	

Are you planning to further your education? Yes No

If "Yes", where do you plan to attend and when?

EMPLOYMENT EXPERIENCE

For the last five (5) years, you must account FULLY for your time EMPLOYED and UNEMPLOYED. Start with your present or last job, except schooling, and include military and volunteer work.

May we contact your PRESENT employer? Yes No

Employer:	Dates Employed: From: To:
Address: (street, city, state & zip)	Hourly Rate or Annual Salary: Starting: Final:
Job Title:	Telephone Number:
Supervisor:	Job Duties:
Reason for Leaving:	
Employer:	Dates Employed: From: To:
Address: (street, city, state & zip)	Hourly Rate or Annual Salary: Starting: Final:
Job Title:	Telephone Number:
Supervisor:	Job Duties:
Reason for Leaving:	
Employer:	Dates Employed: From: To:
Address: (street, city, state & zip)	Hourly Rate or Annual Salary: Starting: Final:
Job Title:	Telephone Number:
Supervisor:	Job Duties:
Reason for Leaving:	
Employer:	Dates Employed: From: To:
Address: (street, city, state & zip)	Hourly Rate or Annual Salary: Starting: Final:
Job Title:	Telephone Number:
Supervisor:	Job Duties:
Reason for Leaving:	
Employer:	Dates Employed: From: To:
Address: (street, city, state & zip)	Hourly Rate or Annual Salary: Starting: Final:
Job Title:	Telephone Number:
Supervisor Name:	Job Duties:
Reason for Leaving:	

EMPLOYMENT EXPERIENCE CONTINUED

Employer:	Dates Employed: From: To:
Address: (street, city, state & zip)	Hourly Rate or Annual Salary: Starting: Final:
Job Title:	Telephone Number:
Supervisor:	Job Duties:
Reason for Leaving:	
Employer:	Dates Employed: From: To:
Address: (street, city, state & zip)	Hourly Rate or Annual Salary: Starting: Final:
Job Title:	Telephone Number:
Supervisor:	Job Duties:
Reason for Leaving:	
Employer:	Dates Employed: From: To:
Address: (street, city, state & zip)	Hourly Rate or Annual Salary: Starting: Final:
Job Title:	Telephone Number:
Supervisor:	Job Duties:
Reason for Leaving:	
Employer:	Dates Employed: From: To:
Address: (street, city, state & zip)	Hourly Rate or Annual Salary: Starting: Final:
Job Title:	Telephone Number:
Supervisor:	Job Duties:
Reason for Leaving:	
Employer:	Dates Employed: From: To:
Address: (street, city, state & zip)	Hourly Rate or Annual Salary: Starting: Final:
Job Title:	Telephone Number:
Supervisor:	Job Duties:
Reason for Leaving:	

REFERENCES

Please list at least three persons who are not relatives and are familiar with your knowledge, skills, and abilities.

Name	Title/Business	Phone #	Email Address	# Years Acquainted

TECHNICAL SKILLS & KNOWLEDGE

Skills Inventory	Yes	No	Level of Skill	Years of Experience
Typing:	<input type="checkbox"/>	<input type="checkbox"/>	Speed	
MS Office Software:	<input type="checkbox"/>	<input type="checkbox"/>	Type(s)	
Computer Operations:	<input type="checkbox"/>	<input type="checkbox"/>	Type(s)	
Telephone (ACD) Systems:	<input type="checkbox"/>	<input type="checkbox"/>	Type(s)	
Other Office Equipment/Software:	<input type="checkbox"/>	<input type="checkbox"/>	Type(s)	
Summarize any additional qualifications or special skills that we should consider:				

List professional, trade, business, civic or volunteer activities and certifications, or licenses held which may relate to the position you are applying for.

Indicate any languages and proficiency levels that you speak, read and/or write that will assist in the position sought.

	Fluent	Good	Fair
Speak			
Read			
Write			

PLEASE READ CAREFULLY BEFORE SIGNING!

If you have any questions regarding this statement, please ask an employment interviewer **BEFORE** signing.

I certify the facts set forth in my application for employment are true and complete to the best of my knowledge. Further, I understand that, if employed, any misrepresentation on the application shall be considered sufficient cause for immediate dismissal. I authorize the Diocese to verify all statements contained in this application and make any necessary reference checks.

I understand that I can withdraw from the application process at any time.

I understand that in connection with the application process, the Diocese may request information from my past employers, educational institutions, personal references and any public or private agencies that have issued me either a professional or vocational certification or license. I also understand that such investigation may include a review of my credit history, motor vehicle records, any criminal records, and drug testing. **I have provided complete and truthful information to the Diocese regarding all sources of information about my past employment, education, licensure, certification, criminal conviction and nolo contendere record, as well as any other information requested in the employment application, and have been fully informed that any misrepresentations or material omissions concerning such information will be grounds for rejecting my application, withdrawing any offer of employment, or immediate discharge.**

I hereby release and hold harmless, the Diocese, its directors, its officers, employees, agents, and contractors, and any other person, or public or private entity inquiring about, investigating, furnishing, communicating, reviewing, or evaluating information or documents pursuant to this application and employment process.

Notwithstanding any other statements to the contrary, whether written or verbal, I understand and agree that, if hired, my employment is for no definite period of time and, regardless of the date or frequency of payment of my wages or salary, may be terminated at any time, with or without prior notice, with or without cause, at the option of the Diocese or me. I understand that this may not be modified or in any way changed or eliminated without written consent signed by both the Diocese and me.

Signature of Applicant

Date

- I Agree. (By checking this box and typing your name above, you have agreed that this is your electronic signature.)