EMPLOYMENT APPLICATION



POSITION APPLIED FOR		D/	ATE	
NAMELast				
Last	Fir	st	Middle	
ADDRESS Street	City			
Street	City	Sta	ite	Zip Code
E-MAIL ADDRESS				
HOME TELEPHONE NUMBER		BUSINESS	TELEPHONE NUME	ER
CELL PHONE NUMBER		ARE YOU AT LEAS	ST 18 YEARS OLD?	□YFS □ NO
		7		
				TH COMMUNITY (as indicated in the
minimum requirements for the po	SILION), PLEASE IDENTIFY Y	OUR PARISH/ COIVII	MUNITY:	
	DADIOLI COLLOCI CLIANICE			OF OFATTLE OATHOUG COMMUNITY
SERVICES, OR OTHER CATHOLIC E				OF SEATTLE, CATHOLIC COMMUNITY YES □ NO
IF YES, PLEASE INDICATE WHERE:	·			
			RY BECAUSE OF VIS	A OR IMMIGRATION STATUS? (Proof
of employment eligibility will be re	quired upon employment)	☐ YES ☐ NO		
HOW DID YOU HEAR ABOUT THE	S OPENING?			
		Please list sp	pecific website, newspaper,	etc.

EDUCATION/SKILLS:

	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	CIRCLE LAST YEAR COMPLETED	GRADUATED?	LIST DIPLOMA OR DEGREE
HIGH SCHOOL			1 2 3 4	☐ YES ☐ NO	
COLLEGE			1 2 3 4	☐ YES ☐ NO	
COLLEGE			1 2 3 4	☐ YES ☐ NO	

Persons needing accommodation to complete the application process should notify the Archdiocese.

OTHER TRAINING/EDUCATION/SKILLS:			
PREVIOUS EXPERIENCE:			
Please list name, address, and phone number of previous most recent experience first.	employment, military,	or volunteer experience	with
Name of Organization	From	То	
Name of Organization Full Time paid Part			
	Time paid Current/E		
Status: Volunteer Full Time paid Part	Time paid Current/E	Inding salary	
Status: Volunteer Full Time paid Part Address Phone number Supervisor _	Time paid Current/E	Inding salary	
Status: Volunteer Full Time paid Part Address	Time paid Current/E	Inding salary	
Status: Volunteer Full Time paid Part Address Phone number Supervisor Job Title	Time paid Current/E	Inding salary	
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Status: Volunteer Full Time paid Part Address Phone number Supervisor _ Job Title Duties and responsibilities of position:	Time paid Current/E	Inding salary	
Status: Volunteer Full Time paid Part Address Phone number Supervisor Job Title	Time paid Current/E	Inding salary	

2. Name of Organization	Fro	m	То
Status: Volunteer Full Time paid	Part Time paid	Current/Ending s	salary
Address			
Phone number Su	pervisor		
Job Title			
Duties and responsibilities of position:			
Reason for Leaving			
Name known by (if different than present na	ame)		
3. Name of Organization	Fro	m	To
Status: Volunteer Full Time paid	Part Time paid	Current/Ending sa	alary
Address			
Phone number Su	pervisor		
Job Title			
Duties and responsibilities of position:			
Reason for Leaving			
Name known by (if different than present na	ame)		

4. Name of Organization		From	То
Status: Volunteer _	Full T ime paid _	Part Time paid	Current/Ending salary
Address	·		
Phone number	Superv	sor	
Job Title			
Duties and responsibilities of	position:		
Reason for Leaving			
Name known by (if differen	t than present name)		
We may contact the employers list	ad above upless you inc	licato thoso you do n	not want us to contact.
We may contact the employers list	•	•	
Name of employer(s)			
Reason:			
REFERENCES: Give name, address and telephone nu	mber of three references w	ho are not related to yo	ou and are not previous supervisors:
1.			
2.			
3.			
understand that if I am employed fall termination. I authorize the employer and "references" I provided, and any of employment resume or a personal intel have against the employer or its repres	th in the Application of Erse or misleading statemen to contact and obtain information party necessary to verification. To assist in the process and sentatives, for seeking, and sentation information	ts given on my applica irmation about me from fy the accuracy of infori essing of my application using information to en for this purpose. I und	ad complete to the best of my knowledge. I ation or during my interview(s) may result in a previous employers, educational institutions mation I disclosed in this application, a related in, I waive all rights and claims I may otherwise evaluate my employment request and all other derstand that the Archdiocese of Seattle will eck. If I am hired my employment is condition
I understand that any offer of a positio written offer from a qualified represent		diocesan policies & guid	delines which cannot be superseded except by
			stand that my status as an applicant will end. I nonths may request this application be used.
DATE APPLIC	ANT'S SIGNATURE		

Rev. 07/1'