

## DIOCESE OF LAREDO APPLICATION FOR EMPLOYMENT

Position Applying For:		<b>Application Date</b> :	
Please complete application in full, if so Incomplete applications may ca		ly to you, state N/A (rang or may not be cons	
Name:Last	First	Mid	ddle
Address:	City	State	Zip Code
Home Telephone Number	Alterna	ate Telephone Numbe	er
E-mail address:			
How did you learn of this position?			
Salary/Wages Desired: (do not leave blank;	a numerical value must	t be indicated)	
Have you ever been employed with the Dioce If yes, provide date:			

(Accommodations for persons with disabilities will be provided unless the accommodation would place an undue hardship on the employer. Persons in need of accommodation should notify the Office of Human Resources).

Are you at least 18 years of age? \_\_\_\_\_\_Yes \_\_\_\_\_No (if reply is no, a work permit may be required)

Are you able to perform the essential job functions of the position for which you are applying, with or

without reasonable accommodation? Yes \_\_\_\_\_ No

# **EDUCATION:**

High School:	City/State:	
Diploma Received: Yes	No	
Undergraduate Studies -		
College/University:		_
City/State:		_
Degree Received: Yes	No	
Degree:		_
Course of Study:		_
Graduate Studies -		
		_
Degree Received: Yes		
		_
<u> </u>		_
<b>Doctoral or Other Professional Edu</b>	ucation –	
College/University:		
City/State:		
Degree Received: Yes	_ No	
Degree:		
Course of Study:		

# **EMPLOYMENT EXPERIENCE:**

Start with your present job or last job held, if currently unemployed. List all jobs throughout your career.

1.	Employer:			
	Address:			
	Phone Number:	Supervisor:		
	Dates of employment:		Starting Salary/Ending Salary:	
	Position/Job title:		Full-timePart-time Temp	
	Duties/Work Performed:			
	Reason for leaving/desire to leave, if currently employed:			
	Name known by (if different than your present name):			
2.	Employer:			
2.	Address:			
2.		Supervisor	:	
	Address:	Supervisor	: Starting Salary/Ending Salary:	
	Address: Phone Number:	Supervisor		
	Address:  Phone Number:  Dates of Employment:	Supervisor	Starting Salary/Ending Salary:	
	Address:  Phone Number:  Dates of Employment:  Position/Job title:	Supervisor	Starting Salary/Ending Salary:	

3.	Employer:			
	Address:			
	Phone Number:	Supervisor:		
	Dates of employment:		Starting Salary/Ending Salary:	
	Position/Job title:		Full-timePart-time Te	mp
	Duties/Work Performed:			
	Reason for leaving/desire to leave:			
	Name known by (if different than your present name):			
<u> </u>				
4.	Employer:			
	Address:			-
	Phone Number:	Supervisor:		
	Phone Number:  Dates of employment:	Supervisor:	Starting Salary/Ending Salary:	
		Supervisor:	Starting Salary/Ending Salary: Full-timePart-timeTe	mp
	Dates of employment:	Supervisor:		emp
	Dates of employment:  Position/Job title:	Supervisor:		emp

to contact:			
Name of Employer (s):			
Reason:			
Name of Employer (s):			
Reason:			
	O TRAINING/ CONTINUING EL		
Summarize your interest	in working for the diocese.		
REFERENCE INFORM	ATION:		
Provide information of three	ee references that are not related t	to you and are not j	previous employers.
1 Name:		Telephone:	
	Relationship:	-	
-	Kelutionsinp.		
	Relationship:		
3. Name:		_ I elephone:	
Occupation:	Relationship:		Years Known:

Employers listed above may be contacted for reference unless you indicate those you do not want the diocese

Do you have relatives working for the Diocese of Laredo? Yes No
If yes, please list name(s) and location:
If you are hired for the position for which you have applied, would you be in a supervisory relationship with any member of your family, household, or relative? Yes No
Please indicate the name(s) and relationship(s) and location/entity at which he/she is employed:
If an employment offer is made, when are you available for work?
If the position you are applying for requires a valid Texas Driver License, do you currently meet this requirement? (please review the job posting or job description to respond) Yes No
If hired, can you provide documents required to establish your eligibility to work in the United States?  Yes No
If the position you are applying for requires that you be in full Communion with the Catholic Church (as indicated in the minimum requirements for the position), please provide the name of the parish and Pastor who can verify this requirement:
Have you ever been convicted of a felony or subjected to a deferred adjudication on a felony charge? YesNo (A conviction may not disqualify you from employment; however, a false statement will.)
If you respond yes, please explain in concise detail the dates and nature of the offense(s), the name(s) and location(s) of the court(s), and the disposition of the case(s).
If applying for a position to work with children/youth, please answer the following question: Have you ever been accused, arrested, charged, convicted or subjected to administrative/employment actions taken as a result of any allegation of child abuse or neglect? Yes No
If yes, please explain: (Please note that an affirmative response to the above question will not necessarily bar you from employment).

## **Applicant's Certification and Agreement**

### EMPLOYMENT AT WILL

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer, through an authorized employer representative and me in writing.

I fully understand and agree that, if I am employed, my employment is for no definite period of time and may be terminated at any time by either the Diocese of Laredo or me, as the Diocese of Laredo is an at-will employer.

### **CONSENT**

I certify that all information provided by me and all statements contained herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I voluntarily give the Diocese of Laredo the right to make a thorough investigation of my employment history, educational credentials, and references provided.

I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose. I further release from all liability or responsibility representatives of the diocese and others supplying information.

In the event of employment or consideration for employment, I understand that false or misleading information given in my application or interview(s), or omission of any information may result in discharge, if hired or grounds for refusal to hire.

I understand that, if hired, I am required to abide by all employer policies and will be required to complete, sign and comply with the Ethical Policies of the Diocese of Laredo. This application will expire upon closing of the position. I understand that my status as an applicant will end. I may re-apply for open and posted positions by completing a new application.

	Signature of Applicant	Date	
Human Resources Departm	nent Use Only-		
Date Application Received	:		
HR Staff:			
		HR - Revised 6/13/2017	