ARCHDIOCESE OF GALVESTON-HOUSTON Application for Employment

Date: _____

	PRINT NAME					SOCIAL SECURITY NO.		
 	LAST	FIRST	MIDDLE		MAIDEN		_	
	ADDDESS							
PERSONAL	ADDRESSSTREET							
ERS	CITY STATE ZIP TELEPHONE							
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	IN CASE OF EMERGENCE, NOTIFE							
	NAME ADDRESS			TELEPHONE				
JOB INTEREST	POSITION DESIRED			REFERRED BY				
	DATE AVAILABLE			SALARY DESIRED				
	LIST NAMES OF RELATIVES EMPLOYED BY DIOCESE/PARISH							
	WERE YOU EVER EMPLOYED BY THE CATHOLIC CHURCH?YESNO							
	IF YES, WHERE AND WHEN?							
	HAVE YOU ANY PHYSICAL LIMITATIONS THAT PROHIBIT PERFORMANCE OF WORK FOR WHICH YOU ARE BEING CONSIDERED? YES NO IF YES, PLEASE DESCRIBE:							
EDUCATION	HIGH SCHOOL	NAME CITY/LOCA		TION DEGREE/MAJOR		E/MAJOR	YEAR GRAD. CREDIT/HOURS	
	COLLEGE							
	OTHER							
	FOREIGN LANGUAGE FLUENCY IN SPEAKING IN WRITING							
	OTHER SPECIALIZED SKILLS							
	HOBBIES							
EXPERIENCE	STATE BRIEFLY ANY SPECIAL EXPERIENCE OR QUALIFICATIONS:							
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EMPLOYMENT HISTORY PLEASE LIST ALL EMPLOYMENT STARTING WITH PRESENT OR MOST RECENT EMPLOYER ACCOUNT FOR ALL PERIODS, INCLUDING UNEMPLOYMENT **USE ADDITIONAL SHEET IF NECESSARY** JOB TITLE **DATES EMPLOYER'S NAME DESCRIBE** WAGES **REASON** DEPARTMENT MONTH & ADDRESS AND PHONE NO. **MAJOR DUTIES FOR** YEAR NAME OF **LEAVING SUPERVISOR** FROM **STARTING PER** FINAL то PER FROM STARTING PER FINAL то PER FROM **STARTING** PER **FINAL** то **PER REFERENCES** OFFICE & RESIDENTIAL PHONE NO. NAME **OCCUPATION Pre-Employment Understanding** I voluntarily give the Diocese the right to make a thorough investigation of my current and former employment and activities and release from all liability or responsibility all persons, companies or corporations supplying such information. I agree that the entire contents of this application form, as well as the report of any such investigation, may be used by the Diocese for any administrative purpose. I further understand that any false answers or statements made by me on this application or any supplement thereto, or in connection with the above mentioned investigation, will be sufficient grounds for immediate discharge. I further understand that as a condition of employment I will be asked to complete and sign the necessary forms to comply with the Ethical Policies of the Diocese of Galveston-Houston. Applicant's Signature _____ Date _ The Diocese of Galveston-Houston is an Equal Opportunity Employer. **INTERVIEW COMMENTS INTERVIEW COMMENTS** DATE BY DATE BY REC.FOR HIRE REC.FOR HIRE **POSITION POSITION** HIRED _____ POSITION_____ SALARY _____ DEPARTMENT ____