

Application for Employment

St. Joseph Church
936 Lake Street
Kalamazoo, MI 49001

Thank you for expressing an interest in employment with **St. Joseph Church**. Consideration was given in the development of this form to your right to individual privacy and equal opportunity. The information requested is needed to help the Parish assess your employment interests and qualifications and to enable us to contact you. Even if you attach a resume, it is necessary to answer all questions. Please print in black ink or type.

St. Joseph Church is an Equal Opportunity Employer, offering job opportunities on an equal basis to all qualified persons regardless of race, sex, religion, age, color, national origin, citizenship status, physical or mental disability, or veteran status; except, of course, in cases where religion is a bona fide occupational qualification.

Date of Application _____

PERSONAL INFORMATION

Name _____ Social Security No. _____

Email address _____

Current Address _____
Street Address of Box Number City State Zip Code

Permanent Address _____
(you can leave this line blank if this is the same as your current address)

Daytime Phone ____ (____) _____ Position Applied For _____

Cell Phone ____ (____) _____ Date Available To Start Work _____

Evening Phone ____ (____) _____ Are You Under 18 Years of Age? ____ Yes ____ No

If you're hired, can you furnish proof that you are eligible to work in the United States? ____ Yes ____ No

If no, please explain. _____

Have you ever been convicted of a felony or misdemeanor? ____ Yes ____ No

If yes, please explain. _____

Note: A prior conviction does not automatically disqualify you from employment since the nature and seriousness of the offense will be considered in light of the type of job for which you are applying.

EDUCATIONAL DATA

	Name and Location of School	Degree, Diploma, or Certificate	GPA	Major Course of Study
Last High School	_____	_____	_____	_____
College or University	_____	_____	_____	_____
Business or Technical	_____	_____	_____	_____
Graduate School	_____	_____	_____	_____
Other Institution	_____	_____	_____	_____

LICENSES AND CERTIFICATES

Type of License/Certificate	Issuing Agency	Number	Exp. Date
Driver's Chauffeur's	_____	_____	_____
Professional _____	_____	_____	_____
Technical _____	_____	_____	_____
Other _____	_____	_____	_____

FOREIGN LANGUAGE SKILLS

Are you fluent in or familiar with any foreign languages? ___ Yes ___ No

If yes, please specify _____

EMPLOYMENT HISTORY

Please list your work experience. Include all employment, whether full time, part-time, summer or temporary, during the past ten years. You may include additional experience beyond the last ten years if you desire. Attach an additional sheet if necessary.

Present or most
Recent employer _____ From _____ to _____

Address _____

Position _____ Rate of Pay _____

Description of duties and responsibilities _____

Reason for leaving _____

Supervisor Name _____ Phone # _____

May we contact your present employer? Yes No

Previous employer _____ From _____ to _____

Address _____

Position _____ Rate of Pay _____

Description of duties and responsibilities _____

Reason for leaving _____

Supervisor Name _____ Phone # _____

Previous employer _____ From _____ to _____

Address _____

Position _____ Rate of Pay _____

Description of duties and responsibilities _____

Reason for leaving _____

Supervisor Name _____ Phone # _____

Military Service _____ From _____ to _____

Discharge date _____ Rank _____

REFERENCES

Please indicate two additional individuals having knowledge of your related work experience and/or academic background.

Name _____ Phone # _____

Current Address _____
Street Address of Box Number City State Zip Code

Name _____ Phone # _____

Current Address _____
Street Address of Box Number City State Zip Code

Name _____ Phone # _____

Current Address _____
Street Address of Box Number City State Zip Code

SIGNATURE

I authorize the release to St. Joseph Church of all information requested about my work record from my previous employer(s) and/or my academic records (transcripts). I understand this information will be used only to evaluate my qualifications for work. I agree that it will not be necessary for each employer/institution that provides this information to notify me when the requested information is released. I hereby relieve all individuals connected with such release from liability for providing this information.

A drug test may be required for employment. I understand that any offer of employment may be withdrawn if I test positive for drug use.

I understand any false statement by me in this application, or failure to give any material information requested, will be cause for my rejection or dismissal.

Signature _____ Date _____