

APPLICATION FOR EMPLOYMENT



Date:

CONTACT INFORMATION

Last Name First Name Middle Name Suffix

Street Address

City State Zip Code

Email Address Social Security

Primary Phone Cell Phone Alternate Phone

Are you a Roman Catholic fully able to participate in the sacramental life of the Church? Yes No

Parish, City Pastor

Parish Involvement Number of years a parishioner

Note: Some, not all, positions in the parish/school might require the applicant to be Catholic.

POSITION SOUGHT: *(Please list all that apply.)*

Full Time Part Time Location:

Parish School Chancery Other:

When are you available to begin employment? Please indicate salary requirements:

*As a condition of employment a criminal background check is required.
Employment is contingent upon results of individual criminal background checks and reference checks.*

ADDITIONAL INFORMATION

Have you ever been employed by the Archdiocese of Kansas City in Kansas? Yes No
If yes, Location: Date(s):

Have you ever served as a volunteer in the Archdiocese of Kansas City in Kansas? Yes No
If yes, Position: Location:

Have you ever had your volunteer service or employment terminated by any parish, school, or institution? Yes No

If yes,
please explain:

Do you have relatives currently working in the Archdiocese? Yes No

If yes, name and location:

How did you learn of the position for which you are applying?
(i.e. newspaper name, parish bulletin, web site, etc.)

If applicable, please list other name(s) under which your
credits/credentials/experience may be filed.

EDUCATION

School Attended	Name of School (include complete address)	Did you graduate?	Last year completed?	Credits/Degree	Major/Minor
High School			<input type="checkbox"/>		
Undergraduate School			<input type="checkbox"/>		
Graduate School					

Graduate School area(s) of
concentration:

Specialized skills and training, course work, licenses,
honors or certifications received which you feel better
qualify you for the position for which you are applying:

EQUIPMENT EXPERIENCE (If applicable to the position)
Example: Computer skills, office machines, etc.

REFERENCES: Give name, address and telephone number of references who are not related to you and are not previous employers. Use notes space at end if additional space is needed.

Name	Address	Telephone

TO BE EMPLOYED BY THE CHURCH ...

Please describe your perception of the ministry and role of the position for which you are applying. Why are you interested in this position?

EMPLOYMENT EXPERIENCE. (All information is required. *DO NOT WRITE "see resume."* Begin with the most recent. Use notes section at end of document if additional space is needed.)

1. Job Title From (Mo./Yr.) To (Mo./Yr.)
Dates of employment

Name and address of employer:

Name of supervisor Title of Supervisor Phone number of supervisor

Reason for leaving Beginning Salary Ending Salary

Description of Duties

2. Job Title From (Mo./Yr.) To (Mo./Yr.)
Dates of employment

Name and address of employer:

Name of supervisor Title of Supervisor Phone number of supervisor

Reason for leaving Beginning Salary Ending Salary

Description of Duties

3. Job Title From (Mo./Yr.) To (Mo./Yr.)
Dates of employment

Name and address of employer:

Name of supervisor Title of Supervisor Phone number of supervisor

Reason for leaving Beginning Salary Ending Salary

Description of Duties

4. Job Title From (Mo./Yr.) To (Mo./Yr.)
Dates of employment

Name and address of employer:

Name of supervisor Title of Supervisor Phone number of supervisor

Reason for leaving Beginning Salary Ending Salary

Description of Duties

May we contact your current employer at this time? Yes No

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

Are you able to perform the specific job related functions in the job for which you are applying? Yes No

AFFIDAVITS AND RELEASES: (Please read and sign the following)

(A) Have you ever been charged with, accused of, or convicted of child abuse? Yes No If yes, please explain in the notes section at end of document.

I understand that the Archbishop of the Archdiocese of Kansas City in Kansas takes all allegations of abuse seriously. I further understand that the Archdiocese cooperates fully with the authorities to investigate all cases of alleged abuses. Abuse of minors or vulnerable adults is grounds for immediate dismissal and possible criminal charges.

(B) Have you ever been convicted of a crime? Yes No If yes, please explain in the notes section at end of document.

A conviction record is not necessarily a bar to employment. Each application will be considered individually, taking into account the nature and seriousness of the offense, how long ago it occurred, and rehabilitation. Do not answer yes if the conviction has been expunged or pardoned.

(C) I certify that the information provided on this application is true and complete to the best of my knowledge and agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for termination if discovered at a later date.

I hereby grant permission to the Archdiocese and related entities to investigate my background, qualifications and references and to release this application and related information to the appropriate search committees and prospective employers within the Archdiocese of Kansas City in Kansas. I hereby release from liability the Archdiocese, related entities, and their agents from liability in connection with investigating and evaluating my application and sharing the information as described above.

I also hereby give permission for the Archdiocese to conduct a criminal background check, arrest records check, abuse registry check, and driving record check for the purposes of my employment. I have also read and understood the above stated information within this release and am signing below of my own free will.

I authorize persons, schools, current employer and previous employers, and organizations named in this application to provide the Archdiocese of Kansas City in Kansas with any relevant information that may be required. I further release all parties providing information from any and all liability or claims for damages whatsoever that may result from this information's release, disclosure, maintenance, or use.

My signature indicates that I have read and understand the above.

Applicant Signature
(Typing your name indicates signature)

Date

Application reviewed by

Date

If extra space is needed, please type in the box below and identify the question you are answering.