APPLICATION FOR EMPLOYMENT

DIOCESE OF VICTORIA

Fill out the application form completely. If questions are not applicable, enter "NA". **Do not leave questions blank.** Be sure to sign when completed. The Diocese of Victoria is an Equal Opportunity Employer. However, because we are part of the Catholic Church, some positions may only be available to Catholics who are in good standing with the Church.

	Social Security No	
Middle	·	
City	State	Zip Code
ears		
City	State	Zip Code
·		-
Work T	elephone Number	
m name on this application	1	
Da	ate Available:	
Are you willing to wor	k hours other than 8-5?	YesNo
Current	Driver's License #	
uip in a Catholic parish or faith con	nmunity (as indicated in the mini	mum requirements for the
_Excellent		
_YesNo If yes, whi	ich language(s)	
pe?		
rom incarceration for a felony?esponse to the above question will i	YesNo not necessarily bar you from empl	oyment.)
iminal record and a report of cleara	nce is required for employment in	the Diocese of Victoria.
No		
Please list specific newspaper.	etc.	
	City City Work T Manage on this application Da Are you willing to wor Current ip in a Catholic parish or faith con Victoria or any of its parishes, scho or and reason for leaving Excellent Yes If yes, while or in this country because of visa or in a employment) exponse to the above question will in iminal record and a report of cleara No	City State Work Telephone Number m name on this application Date Available: Are you willing to work hours other than 8-5? Current Driver's License # ip in a Catholic parish or faith community (as indicated in the minimal victoria or any of its parishes, schools or other entities? or and reason for leaving Excellent YesNo

	Name and Address of School	Dates Attended From / To	Date Graduated	List Degree & Date
College				
College				
Technical,				
Vocational or				
usiness School				
High School				
	KILLS/QUALIFICATIONS: List all job related, computer equipment, types of software and hards			ce equipment
UNDE	READ THE FOLLOWING STATEME RSTANDING AND ACCEPTANCE BY	Y SIGNING IN THE SPA	CE PROVIDED)
1. I certify that all complete, and I usermination. 2. I understand that 3. I authorize any osemployment, edus application, and I userstand that me in the future. 5. If you decide to esta a report is obtain substance of the isolation of the iso	restanding and acceptance by me in connection inderstand that any misstatement, falsification, or as a condition of employment, I will be required to fee the persons or organizations referenced in this a cation, or any other information they might have, release all such parties from all liability from any acceptance of an offer of employment does not congage an investigative consumer reporting agency and you must provide, at my request, the name and formation contained in the report. Catholic Diocese of Victoria to conduct a criminal eck as a condition of my employment.	on with my application, whether omission of information may be to provide legal proof of authorizated application to give you any and application to otherwise, with regard damages which may result from the create a contractual obligation upon and address of the agency so I in the later and during my service. I at a sand policies for the job for which LERANCE FOR ABUSE and take test fully with the authorities to missal and possible criminal charging time.	on this document of grounds for refusal to the ion to work in the Util information concert to any of the subject furnishing such information the employer to contain history, I authorize may obtain from the ords check, abuse resulthorize investigation at I am applying, are all allegations of investigate all cases es.	or not, is true to hire, or if hi nited States. rning my prevents covered by mation to you ontinue to empare you to do so the nature egistry check, as of all statem abuse seriously of alleged abounds for denial
1. I certify that all complete, and I use termination. 2. I understand that 3. I authorize any osemployment, edus application, and I understand that me in the future. 5. If you decide to esta a report is obtain substance of the ise. 6. I authorize the Conditional distriction of the ise. 7. I understand that contained in this ise. 8. I agree to observe in understand that further understand that further understand Abuse of minors. 10. I understand that in understand and employment and automatic denial. 12. My signature indicates.	restranding and acceptance by me in connection inderstand that any misstatement, falsification, or as a condition of employment, I will be required to fee the persons or organizations referenced in this a cation, or any other information they might have, release all such parties from all liability from any acceptance of an offer of employment does not congage an investigative consumer reporting agency and you must provide, at my request, the name information contained in the report. Catholic Diocese of Victoria to conduct a criminal eck as a condition of my employment. It is a criminal background check will be conducted prapplication. It is all of the Catholic Diocese of Victoria has a ZERO TOI dependent of the Catholic Diocese of Victoria cooperator vulnerable adults is grounds for immediate dism I may withdraw from the application process at an agree that false statements and/or omissions regard that refusal to inform the Catholic Diocese of the application.	A SIGNING IN THE SPACE To mount with my application, whether omission of information may be a personal or otherwise, with regard damages which may result from the create a contractual obligation upon and address of the agency so I are all background check, arrest recording to and during my service. I are a sand policies for the job for which LERANCE FOR ABUSE and take test fully with the authorities to missal and possible criminal charging time. ding past conduct and/or present so Victoria of the contents of a sea	on this document of grounds for refusal to the control of the subject furnishing such information concerns the employer to control of the employer to contro	or not, is true to hire, or if hi nited States. rning my prevents covered by mation to you. ontinue to empare you to do so the mature to egistry check, as of all statem abuse seriously of alleged abounds for denial
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PREVIOUS EXPERIENCE:

PLEASE LIST NAME, ADDRESS, AND PHONE NUMBER OF PREVIOUS EMPLOYMENT, MILITARY EXPERIENCE WITH MOST RECENT EXPERIENCE FIRST.

Name of Organization	From	То	
Address			
Phone Number	Supervisor		
Status:Full TimePart Time	Other Specify:		
Salary: Starting Last	Job Title		
Reason for Leaving			
Duties and responsibilities of position			
Name known by (if different than present name))		
Name of Organization	From	To	
Address			
Phone Number	Supervisor		
Status:Full TimePart Time	Other Specify:		
Salary: Starting Last	Job Title		
Reason for Leaving			
Duties and responsibilities of position			
Name known by (if different than present name))		
Name of Organization	From	To	
Address			
Phone Number	Supervisor		
Status:Full TimePart Time	Other Specify		
Salary: Starting Last	Job Title		
Reason for Leaving			
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Name known by (if different than present name))		

Name of Organization	From To
Address	
Phone Number	Supervisor
Status:Full TimePart Time	Other Specify:
Salary: Starting Last	Job Title
Reason for Leaving	
Name known by (if different than present	name)
	From To
Phone Number	Supervisor
Status:Full TimePart Time	Other Specify:
Salary: Starting Last	Job Title
Name known by (if different than present	name)
We may contact the employers listed above	re unless you indicate those you do not want us to contact:
Name of employer(s)	
Reason:	
supervisors:	er of three references who are not related to you and are not previou
3	
If applicable, in your own handwriting, ple	ease answer the following.
If applicable, in your own handwriting, plo What are the strengths you bring to the po	· ·