Catholic Schools of Greater Kalamazoo 1000 West Kilgore Road Kalamazoo, MI 49008 (269) 381-2646, ext. 119

Hackett Catholic Prep High School St. Monica Catholic School St. Augustine Cathedral School (Please circle school(s) for which you are applying)

		1	EMPLOYMENT A	PPLICATION				
Please attach a	additiona	I pages if more	space is needed t	o provide all	requested	information		
Date of Appli	ication	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Personal Infor	<u>rmation</u>							
Name:		Last	First		Middle			
Are there work on name?			u may have under a	different	Yes:		No:	
If yes, please wr	ite the diffe	erent name(s) used	l.		***************************************			
Phone Numbers:	Day: Evening:		Are you 18	years of age or older?	Yes	s: 	No:	
Driver's License	e:	State	Numbe	r		Expiration Da	ite	
Employment Eligibility: Employment I		, can you provide p	roof of citizenship or	legal right to work?	Yes	s: 🔲	No:	
Position Applyi				Source of R	teferral:			
Date Available:		Status Desired: Full-Time Part-Time	☐ Temporary	Desired period of work and/or hours/day:		Desired annual salary:		
interfere with you	ur ability to	work full-time, incl	esponsibilities (for exa uding overtime, in the	position you a	re applying fo	or?	·	
Are you able to p	perform the	essential function	s of the position for w	hich you are a	oplying with o	r without Acco	ommodatio	n?
Yes			No					
Why are you inte	erested in (employment with th	is organization?			_		

Applicant Name:	est	First			Middle	
Residential History						
Present Address:						
				Date first	at this addres	SS:
P.O. Box or Street	City	State	Zip Code		Month/Year	
Previous Addresses:	in the last seven warre t	nakida ani tamr	aran Jaahaal aa	ldraaaa		
List last three residential addresses with	in the last <u>severi years</u> . I	nciuue ariy terrip	iorary/scrioorac		at this addra	?
1.				•	at this addre	
P.O. Box or Street	City	State	Zip Code	From:	/ To:	
2.				How long	at this addre	ss?
P.O. Box or Street	City	State	Zip Code	From:	<u>/ T</u>	0: /
3.				How long	at this addre	ss?
				From:	/ Т	o: /
P.O. Box or Street	City	State	Zip Code			
Have you ever been convicted of a crime are you presently charged with a felony? If yes, please describe (attach additional	?	violations), or	Yes:		No:	
Please be advised: A criminal background check will be conducted as will result in disqualification from consideration for	s part of the employment proce	ss. Any misrepreser sidered justification f	ntation or omission or dismissal if disco	of past convi vered at a lat	ctions or curre ter date.	ent charges
United States Military Service	10.74 ° 1 ° 20 ° 20 ° 20 ° 20 ° 20 ° 20 ° 20					
Branch of Service	Starting Rank	Separati	on Rank	Disch	arge Statu	ıs
Year Entered Year Discharged	Duties in Service					
Current Reserve/National Guard Unit	Reserve/Guard Serv	ice Obligations	6			-17
Education and Training						
Indicate Last Level Completed:						
Elem Mid Sch/ School Jr High	· _	Trade/	College/ Univ		Grad School	

Applicant Nan	ne:	1	First			Middle			
Name of High School, Tech School, and Col		City/State	Major	D	Degree		Month/Year o		
									_
Additional educatio	on, vocation, professional, mi	litary or other educational	/training background inform	ation you fe	el may be i	helpful to u	s in		1
Employment F	Record								_,
parishes or affil	peen employed by or co liate organizations?	ontracted with the Die	ocese, or one of its	Yes:		N	0:		
If so, where?	When?		What position?		Supervis	or's Name	е		
Have you ever a organizations?	applied to work for the I	Diocese, or one of its	parishes or affiliate	Yes:		N	o:		
If so, where?		When?		What pos	sition?				
Employers: List n	nost recent employers fire	st		11-11					
Start Date	End Date	Final Position Title	Final Salary	May	we cont	act this er	mplc	yer?	-
Employer		Last Supervisor's Na	me	Reas	Yes:		No:		_
	City, State, Zip Code					ouving			
Olicet Address, t	oity, State, Zip Code			Phor ()				
Start Date	End Date	Final Position Title	Final Salary	May	we cont	act this er	mplo	yer?	-
Employer	W.1.5.	Last Supervisor's Na	me	Reas	Yes:		No:		
		- Caparillo of a ria				Javing			
Street Address, (City, State, Zip Code			Phor (ne)				
Start Date	End Date	Final Position Title	Final Salary	May	we cont	act this e	mplc	yer?	
					Yes:		No:		

Applicant Name:							
s-	Lasi	First	Middle				
Employer	Last Supervisor's Na	me	Reason for Leaving				
Street Address, City, State, 2	Zip Code		Phone				
References							
List three persons, other than	relatives or personal friends, who h	ave knowledge of you	r work experience and/or education.				
Name/Title	Mailing Address		Phone				
Certification and Signal		liability any ners	on employer company or organizatio				
I certify that the information correct to the best of my know			on, employer, company or organization information. I understand results of m				
any misstatement or omiss considered as grounds for discontinuing the hiring proces	sion of information will be rejecting this application,	background chec employment and	k may be used in determining an offer o other employment decisions.				
I authorize verification of all application and during er authorize the references and ethe Diocese of Kalamazoo or pertinent information concerni	information provided on this nployment interviews; and employers listed above to give r its affiliate organizations all	consideration doe Kalamazoo. I un with the Diocese may be terminated for any cause or	I understand that submitting this application for consideration does not in any way obligate the Diocese Kalamazoo. I understand and agree that all employme with the Diocese of Kalamazoo is on an at-will basis, ar may be terminated by the Diocese of Kalamazoo at any time for any cause or no cause. I understand and agree that r				
In being considered for employ Kalamazoo or its affiliates to background. I authorize and reand organizations (including agencies, schools, and law entany information about me as Kalamazoo or affiliate organ	the rights to investigate my equest all persons, companies credit bureaus, investigative forcement agencies) to furnish requested by the Diocese of	one at the Diocese of Kalamazoo has any authority to of employment other than on an at-will basis. I understand and agree that an offer of employment will r be final until I have received, read, agreed to, and signed to complete list of terms of employment.					

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Applicant's Signature

Date