

## **Application for Employment**

(For use in the Diocese of Metuchen)

The Diocese of Metuchen, its parishes, schools, and facilities, are bound to the canon law of the Roman Catholic Church. As such, certain employment positions must be restricted to members in good standing with the Roman Catholic faith. Where religious denomination is not a critical factor to the performance of required job functions, it is the policy of the Diocese of Metuchen, its parishes, schools, and facilities to afford equal access to programs, services, and employment to all persons where required by state and federal law. Unless duly authorized and acknowledged in writing by the Bishop of Metuchen or the Diocese's General Secretary for Administrative and Legal Services, all employment is on an "Employment at Will" basis.

| Today's Date:                          | Position Applying For:         | Position Applying For:     |                               |  |
|--|--------------------------------|----------------------------|-------------------------------|--|
|  |                                |                            | Yes No                        |  |
| Date You Are Available To Work:        | Parish, School, or Facility (i | Expected Salary/Wage rate: |                               |  |
|  |                                |                            |                               |  |
| PERSONAL INFORMATION                   | N                              |                            |                               |  |
| Last Name                              | First Name                     | MI                         | Telephone Number:             |  |
| Current Address (Street, City, State 8 | How long have you lived here?  |                            |                               |  |
| Previous Address (Street, City, State  | How long did you live here?    |                            |                               |  |
| Are you able to work consiste          | ntly? Yes                      | No                         | Are you legally permitted to  |  |
| Are you able to work overtime          | e? Yes                         | No                         | work in the U.S.?             |  |
| Are you able to travel?                | Yes                            | No                         | Yes No                        |  |
| If 'NO', please explain:               |                                |                            |                               |  |
| EDUCATIONAL BACKGR                     |                                |                            |                               |  |
| Name and address of school atte        | nded                           | Dates Attended             | Degree or Certificate awarded |  |
|  |                                |                            |                               |  |
|  |                                |                            |                               |  |
|  |                                |                            |                               |  |
|  |                                |                            |                               |  |
| UNIFORMED ARMED SER                    | RVICES                         |                            |                               |  |
| Did you serve in the U.S. Unif         | ormed Services?                | Yes                        | s No                          |  |
| If 'YES', Branch and dates of s        | service:                       |                            |                               |  |
| Were vou honorably discharge           | ed?                            | Ye                         | as No                         |  |

| May we contact your current employer?  May we contact your previous employers? |  |  | Yes                    | No               |
|--|--|--|------------------------|------------------|
|  |  |  | Yes                    | No               |
| Dates of employment  | Company name and address<br>(City, State, Zip) | Name and phone<br>number of your<br>supervisor | Position held          | Reason for leav  |
| Started  |  |  |                        |                  |
|  |  |  |                        |                  |
| Ended  |  |  |                        |                  |
|  |  |  |                        |                  |
| Started / /  |  |  |                        |                  |
| Ended  |  |  |                        |                  |
|  |  |  |                        |                  |
| Started  |  |  |                        |                  |
|  |  |  |                        |                  |
| Ended  |  |  |                        |                  |
|  |  |  |                        |                  |
| Started / /  |  |  |                        |                  |
| Ended  |  |  |                        |                  |
|  |  |  |                        |                  |
|  |  |  |                        |                  |
| SKILLS   |  |  |                        |                  |
| Typing   | WPM Com  | puter Skills                                   |                        |                  |
| Shorthand  | WPM  |  |                        |                  |
|  | special skills, licenses, certifica            | ates, etc. relevant to                         | the job for which vo   | ou are applying: |
|  | postar sixinoy meshocoy corunta                |  |                        |                  |
|  |  |  |                        |                  |
|  |  |  |                        |                  |
|  |  |  |                        |                  |
| ror positions wh   | nere operating a motor vehicl                  | e is essential, do you                         | ı have a valid driver' | s license?       |
| Yes  | No DL#   |  |                        |                  |
|  |  |  |                        |                  |

| PERIODS OF UNEMPLO   | OYMENT  |   |   |
|--|---|---|---|
| For each period of unem dates of unemployment  |   | past 7 years that exceeded 6 were not working:  | 0 days, please list the   |
|  |   |   |   |
|  |   | include relatives or employe  |   |
| Name of Reference  | Address   | Telephone T   | itle Years<br>Known   |
|  |   |   |   |
|  |   |   |   |
| APPLICANT'S CERTIFIC   |   | oughly. If you need clarificatio  | n bafara yayı elan ibis   |
|  |   | e Office of Human Resources, I  |   |
| enforcement agencies, and  | any other related indivingles, and facilities), and s.  | employers, educational institution iduals. I agree to HOLD HARMLE its assignees and designees, for a following:   | ESS the Diocese of Metuchen   |
| eligibility to work in 2) I authorize the Dioc conduct a routine by fingerprinting, Moto 3) The Diocese of Met its workplace rules at 1 understand that er is on an "At Will" by that either the employer. | the United States as relese of Metuchen (inclu-<br>ackground investigation<br>r Vehicle check, verifical<br>cuchen (including its parand procedures as outled<br>imployment at the Dioce<br>asis unless otherwise stoyer or I can terminate | rovide personal identification docu<br>quired by federal law.<br>ding its parishes, schools, and fac<br>n in connection with my employment<br>ation of prior employment, and crir<br>rishes, schools, and facilities) expe<br>ined in its Employee Handbook, e<br>use of Metuchen (including its parist<br>tated in writing. I understand Emp<br>my employment at any time, without<br>act of employment, and does not co | cilities), and its assignees to ent, which may include minal records check. ects all employees to observe mployment manuals, etc. shes, schools, and facilities) oloyment at Will to mean out cause and without notice. |
| Metuchen, its parish   | nes, schools, or facilitie  | s to extend an offer of employmer<br>employment unless specifically sta   | nt to me, and acceptance of   |
| APPLICANT'S SIGNATURE  | <u> </u>  | D <i>A</i>  | ATE   |
| APPLICANT'S NAME   |   |   |   |
| THIS SEC   | TION TO BE COMPLE   | ETED BY OFFICE OF HUMAN RE  | SOURCES   |
| Interviewed By:  | Offer Extended:   | Location:   | Compensation Level:   |
| Position Title:  | YES NO Position Accepted:   | Date of Birth:  | Start Date:   |

YES

NO

Driver's License: