

# St. Elizabeth Ann Seton Church

1350 Lyndhurst Dr., Hiawatha, Iowa 52233

ph. 319.393.3778

## Employment Application

Position Applied for \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Home Telephone Number \_\_\_\_\_ Business Telephone Number \_\_\_\_\_

Message Telephone Number \_\_\_\_\_ Social Security Number \_\_\_\_\_

If the position you are applying for requires membership in a Catholic parish or faith community (as indicated in the minimum requirements for the position), please identify your parish/community:

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? (Proof of employment eligibility will be required upon employment)  Yes  No

Have you been convicted of a felony or been released from incarceration for a felony within the last 10 years?  
 Yes  No

If yes, please explain: (Please note that an affirmative response to the above question will not necessarily bar you from employment.) \_\_\_\_\_

Are you at least 18 years old?  Yes  No

How did you hear of this opening? \_\_\_\_\_  
Please list specific newspaper, etc.

### Education/Skills:

	Name and Address of School	Course of Study	Circle Last Year Completed	Graduate?	List Diploma Or Degree
High School			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

We are an equal opportunity employer and fully comply with the Americans with Disabilities Act. Accommodations for persons with disabilities will be provided unless the accommodation would place an undue hardship on the employer. Persons needing accommodation should notify the Parish.

**Other Training/Education/Skills:**


**PREVIOUS EXPERIENCE:**

Please list name, address, and phone number of previous employment, military, or volunteer experience with most recent experience first.

1. Name of Organization _____ From _____ To _____
Status:   ___ Volunteer                   ___ Full Time paid                   ___ Part Time paid
Current/Ending salary _____
Address _____
Phone number _____ Supervisor _____
Job Title _____
Duties and responsibilities of position _____
_____
_____
_____
Reason for Leaving _____
Name known by (if different than present name) _____

2. Name of Organization \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Status: \_\_\_ Volunteer                      \_\_\_ Full Time paid                      \_\_\_ Part Time paid

Current/Ending salary \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_ Supervisor \_\_\_\_\_

Job Title \_\_\_\_\_

Duties and responsibilities of position \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name known by (if different than present name) \_\_\_\_\_

3. Name of Organization \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Status: \_\_\_ Volunteer                      \_\_\_ Full Time paid                      \_\_\_ Part Time paid

Current/Ending salary \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_ Supervisor \_\_\_\_\_

Job Title \_\_\_\_\_

Duties and responsibilities of position \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name known by (if different than present name) \_\_\_\_\_

4. Name of Organization \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Status: \_\_\_ Volunteer                      \_\_\_ Full Time paid                      \_\_\_ Part Time paid

Current/Ending salary \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_ Supervisor \_\_\_\_\_

Job Title \_\_\_\_\_

Duties and responsibilities of position \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name known by (if different than present name) \_\_\_\_\_

We may contact the employers listed above unless you indicate those you do not want us to contact:

Name of employer(s) \_\_\_\_\_

Reason: \_\_\_\_\_

**REFERENCES:**

Give name, address and telephone number of three references who are not related to you and are not previous supervisors:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the Application of Employment are true and complete to the best of my knowledge. I understand that if I am employed false or misleading statements given on my application or during my interview(s) may result in discharge.

I authorize an investigation of statements contained in this application to allow the employer to make an employment decision.

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_