

Archdiocese of San Francisco

Application for Employment

PERSONA	LINFORMATION				
Date	Last Name	First Name	Middle	Other name(s) under	which known
					<u>-</u>
Address No	o. & Street		City	St	ate Zip
()	- () -	() -			
Home Phon	ne Cell Phone	Business Phone	Email Address		
Have you e	ver worked/volunteered for the Ron	nan Catholic Church?	Yes No Where	. When	n
Religion: _		Parish:			
D 1		1 1 1 1 600		(X 1.1	
Do you hav	e any friends or relatives working for Name		?YesNo	yes, state name(s), relati	onship and location: ation
	Name	Kelati	onsmp	Loca	ation
Position ap	nlying for				
Are you app		ς? \ \ Υε	es No Regular	part-time work?	\ \ Yes \ \ No
	Temporary or On-Call	work, e.g., summer or h	oliday work?		Yes No
•	and hours are you available for worl				
If applying	for temporary work, during what pe	eriod of time will you be	available? From: _	To:	
Are vou ava	ailable to work on weekends?	es No. Would	d you be available to we	ork overtime, if necessar	ry? Yes No
-	e 18, can you provide a work permi	_	•		· — —
If hired, car	n you show proof of your right to w	work in the U.S.?			Yes No
	what date can you start work?			-	
	ble to safely perform the essentiantion? Yes No. If no, desc			pplying, either with or	without reasonable
Have you e	ver been terminated or asked to resi	gn from employment:	Yes No If ye	s, please explain:	
EDUCATI	ON, TRAINING AND EXPERIE	NCE			
School	Name and Address	Course of Study	Number of Years Completed	Did you Graduate?	Degree or Diploma
High					
School				Yes No	
College/ University				Yes No	
Other					
				Yes No	
	•	•	•		•



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If applicable to the position for which you are applying, do you speak, read, or write a language other than English? Yes If yes, which language(s) _ Fluent **EMPLOYMENT HISTORY** Please list all present and past employment and work related volunteer activities starting with the most recent for the last ten (10) years, including any positions held in the Archdiocese of San Francisco. Account for all periods of unemployment in excess of one month and for any time periods not included in your resume. Please attach a separate sheet if necessary. Dates of Type of Business Employment: From Name of Employer To Address & Street City State Ok to Contact? Yes No Your Supervisor's Name Telephone No. Your Position and Duties Reason for Leaving Name of Employer Type of Business Employment: From To Address & Street City State Ok to Contact? Your Supervisor's Name Telephone No. Your Position and Duties Reason for Leaving Type of Business Employment: From То Name of Employer Address & Street State Ok to Contact? Your Supervisor's Name Your Position and Duties Reason for Leaving

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REFERENCES				
List below two professional	references who have knowledge of your	work performance within the la	ast ten years.	
First Name	Last Name	Telephone No.	o. Occupation	
Address & Street		City	State Zip	Years Known
		()		
First Name	Last Name	Telephone No.	o. Occupation	
A 11 0 Ct		C'.	G	<u></u>

In consideration of my employment I agree to conform to the rules and standards of the Archdiocese of San Francisco as amended by the Archdiocese of San Francisco from time to time at its discretion.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I understand that employment with the Archdiocese of San Francisco is at-will, meaning that the terms and conditions of employment may be changed with or without notice, with or without cause, including, but not limited to, termination, demotion, promotion, compensation, benefits, duties and location of work. I understand that no representative of the Archdiocese of San Francisco has the authority to make assurances to the contrary.

I also understand that all offers of employment are conditioned on the provision of satisfactory proof of identity and legal authority to work in the United States.

ARCHDIOCESAN STATEMENT OF NON-DISCRIMINATION

All employees of the Archdiocese of San Francisco shall be employed without regard to race, color, sex, ethnic or national origin and pursuant to the San Francisco Fair Chance Ordinance, we will consider for employment, qualified applicants with criminal histories. (Administrative Handbook #4111.4)

CERTIFICATION

hereby certify under penalty of perjury under the laws of the state of California to the application is true and complete. I understand that any false statements shall be sufficiently supply the Archdiocese of San Francisco. My permission is given for contact except where superficially indicated to the contrary. I also understand that the law required	ient cause for disqualification or, if hired, dismissal from to be made with references and employers listed herein.
perform a criminal background check after a live interview or after conditional offer of	•
Archdiocese of San Francisco policies and procedures pertaining thereto.	
Date Applicant's Signature	

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