



ARCHDIOCESE OF WASHINGTON

Archdiocesan Pastoral Center: 5001 Eastern Avenue, Hyattsville, MD 20782-3447

Mailing Address: Post Office Box 29260, Washington, DC 20017-0260

301-853-4500 TDD 301-853-5300

Office of Human Resources

Phone: (301) 853-4513

Fax: (301) 853-7680

Application for Employment

NOTE: Do *not* complete this form if applying for a position in Archdiocesan Catholic Schools (request a *Catholic Schools Application*).

Last Name	First	Middle	Date
Present Street Address	City	State	Zip
			Daytime Phone
			Evening Phone
Permanent Address (If different from present address)			Cell Phone
			E-Mail Address
Have you even been employed by an Archdiocese of Washington or Catholic Charities of the Archdiocese of Washington? Yes No			Are you 18 years of age or older? Yes No
If Yes: From:_____ To:_____			If hired, can you furnish proof of age? Yes No
Location:_____ Position:_____			

I am interested in Employment Opportunities that are: Full Time / Part Time / Temporary / On-Call / Intern

I am a U.S. Citizen or an alien authorized to work in the U.S. Yes No

Position(s) of Interest: 1)_____ 2)_____ 3)_____

Desired Salary:_____ Per:_____ Date available for work_____

Are you able to fulfill the essential functions of the job, with or without reasonable accommodations? Yes No

Are you available to work overtime? Yes No

Please answer the following questions if the position for which you are applying requires operation of a vehicle:

Do you have a current, valid driver's license in either MD, DC or VA? Yes No

Does your driving record contain less than 2 moving violations or at-fault accidents in the last 3 year period?
Yes No

Have you been convicted of either a DUI or a DWI within the last 10 years? Yes No

Have you ever been dismissed from any position? Yes No

Have you ever been forced to resign from any position? Yes No

If you answered Yes to the two questions above, please explain:

Name and location of School	Years/Credit hrs. completed	Major/Minor and Degree/Certification Received /License No.
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High School		Diploma/ GED Yes No	
College			
Postgraduate School			
Other Training or Certifications			

Describe briefly any additional skills, knowledge, or experience you have:

The *Archdiocese of Washington and Archdiocesan locations* comply with all laws concerning nondiscrimination in employment. We do not unlawfully discriminate on the basis of race, religion, color, sex, national origin, marital status, age, unfavorable discharge from military service, arrest record or mental or physical handicap unrelated to ability to perform the duties of a position. It is our policy to offer reasonable accommodations for the special needs of otherwise qualified individuals. Acceptance of this form does not constitute a contract of employment nor is it a commitment to the applicant.

EMPLOYMENT HISTORY-

Please list all employment history beginning with your present or most recent position first. Use additional pages if needed. Include all other names worked under if different than the name you used on this application.

Company/Organization Name		Phone ()
Address		Employed (Month & Year) From To
Title	Annual Salary Starting Ending	Reason for leaving

Duties

Company/Organization Name		Phone ()
Address		Employed (Month & Year) From To
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Duties

Company/Organization Name		Phone ()
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Duties

BUSINESS REFERENCES

Name: _____ Phone No. () _____ - _____

Business Relationship: _____ Email Address: _____

Name: _____ Phone No. () _____ - _____

Business Relationship: _____ Email Address: _____

Name: _____ Phone No. () _____ - _____

Business Relationship: _____ Email Address: _____

I rate my knowledge of the following computer software rate as: 1=Advance, 2= Average, 3= Beginner, 4= None

____ Microsoft Word ____ Excel ____ Access ____ Outlook

Other(s) _____

IMPORTANT – PLEASE READ THIS

You must complete questions I, II, & III only if the position(s) for which you are applying will involve substantial contact with children or other vulnerable individuals, i.e. elderly, mentally or emotionally handicapped, etc.

I. Has a complaint (civil, criminal, or otherwise) ever been filed against you that alleged any inappropriate

conduct with minors, sexual misconduct, or child abuse by you (including internal complaints given to management or supervisors at places of employment)? ____ YES ____NO

If yes, please explain. Please include in your explanation the offense alleged and the disposition of the matter, including: the date and jurisdiction of any conviction; guilty plea; *nolo contendere* plea (no contest); finding of guilt following a trial; or, the receipt of probation before judgement.

- II. Has a complaint (civil, criminal, or otherwise) ever been filed against you that alleged your participation in, facilitation of, or failure to report any inappropriate conduct with minors, sexual misconduct, or child abuse by another (including internal complaints given to management or supervisors at place of employment)? ____YES ____NO

If yes, please explain. Please include in your explanation the offense alleged and the disposition of the matter, including: the date and jurisdiction of any conviction; guilty plea; *nolo contendere* plea (no contest); finding of guilt following a trial; or, the receipt of probation before judgment.

- III. Have you ever chosen not to continue any employment, had your employment terminated, or been subject to any disciplinary action, for reasons relating to allegations of inappropriate conduct with minors, sexual misconduct, or child abuse by you? ____ YES ____NO

If yes, please explain. Please include in your explanation the offense alleged and the disposition of the matter, including: the date and jurisdiction of any conviction; guilty plea; *nolo contendere* plea (no contest); finding of guilt following a trial; or, the receipt of probation before judgment.

IMPORTANT – The following must be read and signed by all applicants.

I hereby confirm that the information provided in this application is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I hereby authorize the Archdiocese of Washington to conduct, obtain, and review state and federal criminal background checks based on the personal

identification information I have provided herein. I hereby grant the Archdiocese of Washington permission to check my background and references as set forth above. Except in the case of its negligent misuse of the information obtained, I hereby release the Archdiocese of Washington, its officers, directors, agents, employees, or representatives from any and all claims arising from or in connection with my background screening. If employed by the Archdiocese of Washington, I will abide by the policies and procedures of the Archdiocese of Washington. I understand and acknowledge the Roman Catholic religious nature of the Archdiocese of Washington. I understand and acknowledge that, in accordance with their role as Church personnel and in witness to the Gospel of Jesus Christ, archdiocesan employees must conduct themselves with integrity and act in a manner consistent with the official teachings, doctrines, laws, and policies of the Roman Catholic Church. 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. Upon termination, I authorize the release of reference information by the Archdiocese of Washington, and archdiocesan locations.

Signature: _____ Date: _____

This section to be completed by Pastor or Agency Director Only

The necessity of passing a state and federal criminal background check for positions involving significant contact with children or other vulnerable persons while working has been explained to this applicant. Offers of employment are contingent upon the applicant successfully completing the state & federal criminal background check. References will be checked before extending an offer of employment. Completed applications are to be received immediately by the Office of Human Resources, Archdiocese of Washington, P.O. Box 29260, Washington, D.C. 20017-0260.

Signature

Date

Name of Location

(Area code) Telephone number

Location Number _____