

EDUCATION

	Elementary	High School	College/ University	Graduate/ Professional
School Name	_____	_____	_____	_____
Location	_____	_____	_____	_____
Years Completed (Circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree	_____	_____	_____	_____
Course of Study	_____	_____	_____	_____

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any honors you have received. _____

State any additional information you feel may be helpful to us in considering your application.

Indicate any foreign languages you can speak, read and / or write.

	Fluent	Good	Fair
Speak _____	_____	_____	_____
Read _____	_____	_____	_____
Write _____	_____	_____	_____

List professional, trade, business or civic activities and offices held.

(Exclude memberships which indicate sex, race, religion, national origin, age, ancestry, handicap or other protected status.)

List any job-related training in the United States military. _____

REFERENCES

Provide names, addresses and telephone numbers of three references who are not related to you and are not previous employers.

Name	Address	Telephone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

EMPLOYMENT EXPERIENCE (Use additional sheets if necessary)

Provide the following information of your past/current employers, assignments or volunteer activities, starting with the most recent. Explain any gaps in employment in the "Comments" section below.

Employer	Dates Employed	Work Performed
_____	From To	_____
Address	_____	_____
_____	_____	_____
Telephone Number	_____	_____
_____	_____	_____
Job Title	Salary	_____
_____	Starting Final	_____
Reason for Leaving	_____	_____
_____	_____	_____

Employer	Dates Employed	Work Performed
_____	From To	_____
Address	_____	_____
_____	_____	_____
Telephone Number	_____	_____
_____	_____	_____
Job Title	Salary	_____
_____	Starting Final	_____
Reason for Leaving	_____	_____
_____	_____	_____

Employer	Dates Employed	Work Performed
_____	From To	_____
Address	_____	_____
_____	_____	_____
Telephone Number	_____	_____
_____	_____	_____
Job Title	Salary	_____
_____	Starting Final	_____
Reason for Leaving	_____	_____
_____	_____	_____

Employer	Dates Employed	Work Performed
_____	From To	_____
Address	_____	_____
_____	_____	_____
Telephone Number	_____	_____
_____	_____	_____
Job Title	Salary	_____
_____	Starting Final	_____
Reason for Leaving	_____	_____
_____	_____	_____

May we contact the Employers listed above? Yes No

Comments: _____

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete to the best of my knowledge.

I give Catholic Charities of Northern Nevada the right to check with former employers and to secure any additional information from any source as necessary, including a criminal record history check as a final screening step in the pre-employment process (or for promotion).

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the Executive Director of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant _____
Date

In Case of an Emergency, Notify:
Name Address Telephone Number

- 1. _____
- 2. _____

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

Interviewer _____ Date _____

Employed Yes No Date of Employment _____

Job Title _____ Hourly Rate/Salary _____ Department _____

