



EMPLOYMENT APPLICATION  
**DIOCESE OF CLEVELAND**

PLEASE PRINT

Date of Application \_\_\_\_\_

Position(s) Applied For \_\_\_\_\_

Referral Source: ☐ Advertisement ☐ Friend ☐ Relative ☐ Walk-In ☐ Employment Agency  
☐ Diocese Website ☐ Other \_\_\_\_\_

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

Address \_\_\_\_\_  
Number Street City State Zip

Telephone - Home:(\_\_\_\_)\_\_\_\_\_ Cell:(\_\_\_\_)\_\_\_\_\_ Email:\_\_\_\_\_

Number to call in case of emergency(\_\_\_\_\_)\_\_\_\_\_ Contact Name: \_\_\_\_\_  
Area Code Relationship

Have you filed an application here before? ☐ Yes ☐ No If yes, give date \_\_\_\_\_

Have you ever been employed here before? ☐ Yes ☐ No If yes, give date \_\_\_\_\_

Are you employed now? ☐ Yes ☐ No May we contact your present employer? ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status ☐ Yes ☐ No  
(Proof of citizenship required upon employment.)

On what date would you be available for work? \_\_\_\_\_

Are you available to work ☐ Full Time ☐ Part Time ☐ Temporary

Are you on a lay-off and subject to recall? ☐ Yes ☐ No

If you are under 18 years of age, can you provide required proof of your eligibility to work? ☐ Yes ☐ No

**PRIOR ADDRESSES**

Please list your previous addresses, retroactively for the past 10 years starting with the last address before your present one.

1. From \_\_\_\_\_ To \_\_\_\_\_  
Number Street City State Zip
2. From \_\_\_\_\_ To \_\_\_\_\_  
Number Street City State Zip
3. From \_\_\_\_\_ To \_\_\_\_\_  
Number Street City State Zip

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## EDUCATION

	Elementary	High School	College/University	Graduate /Professional
School Name:	_____	_____	_____	_____
	_____	_____	_____	_____
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
		(Please circle number)		
Diploma / Degree	_____	_____	_____	_____
Describe Course of Study	_____			
Describe Specialized Training, Apprenticeship, Skills, Extra-Curricular Activities and Foreign Language Skills	_____			
	_____			
Honors Received:	_____			
	_____			

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## EMPLOYMENT EXPERIENCE

Please provide information for all employment within the past 10 years, starting with the most recent employer. Account for all periods including unemployment and service in the armed forces. You may attach additional pages if necessary.

1.	_____	(____) _____	From _____ To _____	_____
	Employer	Telephone	Dates Employed	Work Performed
	_____	_____	_____	_____
	Address / City	State	Zip	
	_____			
	Job Title			
	_____			
	Supervisor			(____) _____
				Telephone
	Reason for Leaving			
	_____			
2.	_____	(____) _____	From _____ To _____	_____
	Employer	Telephone	Dates Employed	Work Performed
	_____	_____	_____	_____
	Address / City	State	Zip	
	_____			
	Job Title			
	_____			
	Supervisor			(____) _____
				Telephone
	Reason for Leaving			
	_____			

3. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Employer Telephone Dates Employed Work Performed

\_\_\_\_\_  
Address / City State Zip

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

\_\_\_\_\_  
Supervisor (\_\_\_\_) Telephone

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

4. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Employer Telephone Dates Employed Work Performed

\_\_\_\_\_  
Address / City State Zip

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

\_\_\_\_\_  
Supervisor (\_\_\_\_) Telephone

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

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**PERSONAL AND PROFESSIONAL REFERENCES (3 Required)**

Name and Occupation	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

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If you are applying for a position that **requires** a standard driver's license or a commercial driver's license in order to perform the essential duties of the job, please answer the following:

Do you currently have a valid Ohio Driver's License? \_\_\_\_ Yes \_\_\_\_ No  
License Number(s) (please specify whether standard or commercial) \_\_\_\_\_

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Have you been convicted of a crime other than a minor traffic offense? \_\_\_\_ Yes \_\_\_\_ No

**If yes, please specify:** \_\_\_\_\_  
(A conviction will not necessarily bar employment. Factors such as the number of convictions, your age at the time of the crime(s), seriousness of the crime(s), and nature of the crime(s) in relation to the position are taken into consideration).

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**APPLICANT'S STATEMENT** (*read carefully before signing*)

I certify that answers given herein are true and complete to the best of my knowledge. I understand that any willful omission, or any falsification or misrepresentation of the information provided on this application or in an interview, is sufficient cause for rejection of my application or termination of my employment in the event of employment.

I understand that this application is not and is not intended to be a contract of employment. In the event of employment, I understand that the Diocese of Cleveland follows an employment-at-will policy, in that I or the employer may terminate my employment at any time, or for any reasons consistent with applicable state or federal law, and that this employment-at-will policy cannot be changed unless the change is specifically authorized in writing.

I authorize all persons, investigation agencies, business organizations, schools, companies, corporations, credit bureaus, any law enforcement agencies to supply the Diocese of Cleveland and/or its agents any information concerning my background, except my current employer if so noted above. If I am applying for a job that requires a driver's license in order to perform the essential duties of the job, I also authorize the Diocese of Cleveland to obtain a Driver's Abstract Report from any state in which I have held a standard or commercial driver's license and I agree to provide the Diocese of Cleveland with information sufficient to allow the Diocese of Cleveland to obtain these reports. I release the Diocese of Cleveland and its agents from any and all liabilities and responsibilities, damages, and claims of any kind whatsoever arising from the investigation of my background.

I understand, also, that in the event of employment I am required to abide by all rules and regulations of the Diocese of Cleveland.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

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**FOR PERSONNEL DEPARTMENT USE ONLY**

Position(s) Applied for: \_\_\_\_\_ Open \_\_\_\_\_ Yes \_\_\_\_\_ No

Position(s) Considered for: \_\_\_\_\_

Arrange Interview: \_\_\_\_\_ Yes \_\_\_\_\_ No

Remarks: \_\_\_\_\_

Employed: \_\_\_\_\_ Yes \_\_\_\_\_ No Date of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_ Department \_\_\_\_\_

By \_\_\_\_\_  
Name and Title Date

References Contacted:

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NOTES: \_\_\_\_\_