# Diocese of St. Augustine

Office of Catholic Education 11625 Old St. Augustine Road Jacksonville, FL 32258 (Tel) 904-262-0668 (Fax) 904-596-1042 Email, fax, or mail application to the school



### APPLICATION FORM FOR A POSITION IN A CATHOLIC SCHOOL

In order to be considered for employment, this application must be filled out completely. Resumes and information posted at the Office of Catholic Education website DO NOT satisfy the requirement of submitting this completed application. Send this document directly to the school.

Date:	Position Applying For: _	Position Applying For:		
Name:Last Name	E' (N		T ::: 1	
Last Ivame	First Name		Initial	
Social Security Number: XXX-X	(Provide the last 5 number	ers)		
Present Address:Street				
Street	City	State	Zip	
How Long at Current address:Ye	earsMonth(s) Email address:			
Home Phone:	Other Telephone:			
ther addresses, if any in the LAST SEVEN (7	7) years:			
Previous Address				
Previous Address				

#### **History Screening**

To ensure the safety and well-being of children and vulnerable adults, all employees will be required to undergo a background screening prior to employment and every five years thereafter while remaining employed. The screenings will include, but may not be limited to, state and national fingerprint-based criminal history check through local (FDLE) and/or national (FBI/VECHS) law enforcement databases. Employees may not begin employment until they receive clearance.

#### **EMPLOYMENT HISTORY**

All information must be supplied on this application Employed From: Month Year Present or most recent employer: Employed To: Month \_\_\_\_\_ Year \_\_\_\_ Address: Position(s) Held: Reason for Leaving: Telephone: May we contact at this time? Yes No Salary: Name of Immediate Supervisor: Job Duties & Responsibilities: Phone: Email: Employed From: Month \_\_\_\_\_ Year \_\_\_\_\_ Previous employer: (if employed less than 10 yrs in above job) Employed To: Month \_\_\_\_\_ Year \_\_\_\_\_ Address: Position(s) Held: Reason for Leaving: Telephone: May we contact at this time? Yes No Salary: Name of Immediate Supervisor: Job Duties & Responsibilities: Phone: Email: Have you ever been employed as a teacher or principal in the Diocese of St. Augustine? Yes No

Any misinformation or deliberate withholding of pertinent information may be cause for terminating any agreement entered into as a result of this application.

If yes, name of school: \_\_\_\_\_\_ Location:\_\_\_\_

If yes, provide name under which you were employed:

## Give full information, including dates:

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School	Name and Location of Institution	Degree / Di Received	iploma	Year of Graduation	Major / M	Ainor area of Study	GPA
High School							
Baccalaureate Studies						_	
Graduate Studies							
EDUCA Subject	ATOR CERTIFICATION t Area	ī	State Issue	d Certi	ficate #	Expiration Da	ate
	ELEVANT EXPERIENC			es □ No If	yes, pleas	e explain:	_ _ 
(professiona	ally disciplined includes ann d from any agency, board or	ulment; revoca	ation or suspe	nsion of teachin			a lette
	NCES: (References should inconal competencies, work performance)				astors who h	nave firsthand knowled	lge of
Name of Re		Phone & Ema	ail: How	long have you wn this person?	Nature o	of Relationship	

## **BACKGROUND QUESTIONS:**

1.	Has a criminal, civil or internal complaint to management or supervisors at places of employment/volunteering ever been filed against you which alleged sexual misconduct, harassment or child abuse by you, or your participation in or facilitation of such activities?					
	☐ Yes	□No				
	where the compla	ease provide the date, nature, and place of the incident leading to the complaint; int was filed; disposition of the complaint; and identify by name and title, the restigated the complaint and the person who adjudicated the complaint.				
2.	in which you had	serve, or have you ever served as a volunteer for any organization, entity or group significant contact with children or other vulnerable populations (i.e. elderly, ionally challenged, etc.)				
	Yes	□ No				
	• •	vide the name, address and telephone number of the organization, period of , supervisor's name; and briefly describe your activities and/or duties.				
3.	Have you ever been terminated from employment or volunteer service or your contract not renewed?					
	Yes	□ No				
	rence(s) or allega	plain. Please include in your explanation the date, nature and place of the occurtion(s) and the disposition of the matter(s). Also identify your employer and sume by name, address and telephone number.				
4.	Have you ever entered a plea of guilty or nolo contendere or been convicted of a crime other than a minor traffic violation?					
	□Yes	□ No				
		plain. Please include in your explanation the date and place of any conviction and ich you were convicted.				

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3.	tions of sexual misconduct or child abuse by you?					
	Yes	□ No				
6.	Have you ever been registered in a pre-trial intervention program?					
	Yes	□ No				
	If yes, please expla	ain.				
7.	Have you ever been a defendant in a civil action for an intentional tort, including but not limited to assault, false imprisonment, rape?					
	□Yes	□ No				
8.	Have you ever held a child care license with the Department of Children and Families or been registered to provide child care in your home?					
	∐Yes	□ No				
9.		n a child care program, have you ever been the subject of disciplinary action or ble for a child care facility receiving an administrative fine or other disciplinary				
	Yes	□No				
	If yes, please expla	ain.				
10.		hat will prevent you from performing the essential functions of the position for olying with or without reasonable accommodation?				

I understand that, if hired, my employment would be "at-will" and could be terminated at any time by either party, with or without cause and with or without notice.

I certify that the statements I have made are true and correct to the best of my knowledge. I understand that the submission of any false information or the omission of any requested information in connection with my application for employment, whether on this document or not, may be cause for failure to hire or for immediate discharge should I be employed by the Diocese of St. Augustine.

Applicants are required to furnish proof of identity and legal work authorization prior to hire.

I authorize the Diocese of St. Augustine to make inquiries including criminal history and driving history. I hereby release and agree to hold harmless from liability any person or organization, who, in good faith, provides information to complete a background investigation. I also agree to release and hold harmless the local parish, school, Diocese of St. Augustine, and the officers, employees, and volunteers thereof from any present or future claim of any kind, resulting from any alleged liability for conducting a background investigation which may include, but not limited to, criminal courts, state and county repositories or criminal records.

In signing this application, I affirm that the information I have given is true and correct. Furthermore, I understand that employment is contingent upon a background screening including a criminal background check.

Signature of Applicant:	 SIGN HERE
Date:	