

Catholic High School 855 Hearthstone Drive Baton Rouge, LA 70806 (225) 383-0397 FAX (225) 383-0381 www.catholichigh.org

Application for Non-Teaching Staff Position

| Name: | | Social Security No.: | | |
|---|----------------|------------------------|-----------------|-----------------------------------|
| Street address: | | Orivers License: State | e:No.: | |
| City: | | State: | Zip: | |
| Phone: Home | Work: | | Cell: | |
| Email Address: | | | | |
| | | | | |
| | Educa | ational Histor | y | |
| College/University (begin with most recent) | City and State | Dates attended | Course of Study | Degree earned (B.A., M.S.,etc) |
| | | | | |
| | | | | |
| | | | | |
| Total semester hours: educa | tion courses: | earned at | University in | (year) |

graduate courses: _____earned at _____University in ____

Employment History

| Employer (Begin with most recent) | Dates | Name and addressof school (city, state) | Immediate supervisor's name and phone number | Subjects taught/ Extracurricular involvement | Reason for leaving position |
|---|-------|--|--|--|-----------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Volunteer Activities

| Organization | Duties | Dates | Contact | Phone number |
|--------------|--------|-------|---------|--------------|
| | | | | |
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| | | | | |

Social Media

It is the policy of Catholic High School to review applicant's social media presence. Please provide the account and username for each of your social media accounts.

| Account (Facebook, Twitter, Instagram, etc.) | Username |
|---|----------|
| | |
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| | |
| | |

Personal Information

| Are you related directly or by man If yes, who and what relation? | | () | |
|--|----------------------------|-----------------------------|--------------------------------------|
| Have you ever engaged in or been injury to a child? Yes | | · · | |
| Were you abused as a child? Yes_with your interviewer rather than not automatically disqualify an ap | answering on this form. An | iswering yes or failir | in confidence ng to answer will |
| | | | |
| Is there any fact or circumstance i your being entrusted with the sup | | | |
| If yes, please explain: | | | |
| | References | | |
| Name | City, State, Zip | Daytime phone Cell phone | How long have you known this person? |
| Professional/Civic | | | |
| Title/Relationship | | | |
| Professional/Civic | | | |

Title/Relationship

Personal

Relationship

Relationship

Family member

Legal History

| 1 es | |
|-----------------------------|---|
| | Answer "yes" if you have entered a plea agreement including a deferred |
| | sentence or deferred judgment arrangement in connection with a criminal |
| | case. |
| Yes | _NoHave you ever been charged with a sexual offense, offense relating to children, |
| | or crime of violence? |
| Yes | _NoHave you ever been the subject of a civil lawsuit involving sexual misconduct, |
| | violence, or injury, involving adults or children? |
| Yes | NoHave you ever been reported to any organization or registry for abuse or |
| 105 | misconduct involving children or adults? |
| $\mathbf{V}_{\alpha\alpha}$ | 8 |
| Yes | |
| | other organization, professional association, or licensing body for violence, |
| | sexual misconduct, or misconduct involving children? |
| Yes | <u> </u> |
| | employment following an allegation of sexual misconduct, physical aggressic |
| | verbal aggression, or other inappropriate behavior or conduct? |
| | |
| Yes | _NoHave you ever been reprimanded, or asked to leave or end your membership in |
| | volunteer civic or non-profit organization? |
| Yes | _NoHave you ever been the subject of a complaint or disciplinary proceeding |
| 105 | against any professional license or professional affiliation held by you? |
| | against any professional needse of professional anniation near by you. |
| For any | "yes" answers, please attach a detailed explanation in writing. |
| roi any | yes answers, please accach a decaned explanation in writing. |
| | |
| | High School appreciates your willingness to share your skills and expertise. Providing |
| | nd security for our students is of utmost importance to us. The information gathered in the |
| applicat | on is designed to help us provide the highest quality service to our students. |
| | |
| Please i | nitial each of the statements below: |
| | |
| | I declare that all statements contained in this application are true and that any |
| | misrepresentation or omission is cause for rejection of my application, or dismissal from |
| | my ministry involvement. |
| | my ministry mvorvement. |
| | I understand that my references will be contacted and that a criminal background about |
| | I understand that my references will be contacted and that a criminal background check |
| | will be conducted. I authorize investigations of all statements contained in this |
| | application. |
| | |
| | I agree to observe all of your organization's guidelines and policies for the position in |
| | which I am applying. |
| | |
| | I understand that I can withdraw from the application process at any time. |
| · | •••• |
| | I understand that Catholic High School has a zero tolerance for abuse and takes all |
| - | allegations of abuse seriously. I further understand that Catholic High School cooperate |
| | fully with the authorities to investigate all cases of alleged abuse. Abuse of students |
| | and/or colleagues is grounds for immediate dismissal and possible criminal charges. |
| | and of concagues is grounds for infinediate distills saland possible of infinial cliarges. |

| | I declare that I have not perpetrated physical abuse neglect against a child or an adult and that I have n | |
|----------|---|--|
| | I understand and agree that false statements and/or and/or present situation may be grounds for denial employment and that refusal to inform Catholic Hi criminal record will result in the automatic denial of indicates that I have read and understand the above | l of the application to provide gh School of the contents of a sealed of the application. My signature |
| Applica | nt's signature: | Date: |
| ~~~~ | | |
| (For Off | fice Use Only) | |
| I have r | reviewed this application and have noted any missing | information. |
| Screenir | ng Committee member signature | Date: |