



Presentation Church Parish School
Church of the Presentation

6715 Leesburg Place, Stockton, CA 95207
(209) 472-2150

EMPLOYMENT APPLICATION

The expectation of the Church of the Presentation as a part of the Roman Catholic Diocese of Stockton is to continue the mission and ministry of the Roman Catholic Church. All those who associate themselves with Presentation, whether as employees or as volunteers, commit themselves to the following principles:

- *To respect the dignity of each person made in God's image and likeness*
- *To maintain standards of professional and personal conduct which reflects the values, principles and teachings of the Roman Catholic Church*
- *To contribute by personal example to a Christian work environment*
- *To support the mission of the Roman Catholic Church, Diocese of Stockton, and Presentation Church and School*

All applicants must meet the requirements of the position.

PLEASE PRINT

Date of Application: _____

Position Applying For: **Principal – Presentation Church Parish School**

Name: _____

Business Telephone: () _____ Home Telephone: () _____

Email Address: _____

Mailing Address: _____

City, State, Zip Code: _____

If the position requires membership in a Catholic parish, please identify your parish: _____

How did you hear about this position?
(e.g. newspaper, website, parish bulletin, friend, etc.)

EDUCATION:

School	Name & Address, City, and Zip Code	No. of years completed	Year of Graduation	Degree or Diploma
High School				
College or University MAJOR:				
College or University MAJOR:				
Vocational Or Business MAJOR:				
OTHER				

1. Have you ever been employed by the Catholic Church? Yes _____ No _____

If yes, when and where? _____

2. Are you at least 18 years old? Yes _____ No _____

3. If hired, can you present proof that you are eligible to work in the United States?

Yes _____ No _____

4. Are you able to perform the essential functions of the job for which you are applying either with, or without reasonable accommodations? Yes _____ No _____

If no, describe the functions that cannot be performed. _____

(NOTE: We comply with the ADA and consider reasonable accommodation measures that may be necessary for employees to perform essential functions.)

5. Have you ever been convicted of or pleaded no contest to a criminal offense, felony or serious misdemeanor? Yes _____ No _____

If yes, state nature of the crime(s), when and where convicted, and disposition of the case.

EMPLOYMENT HISTORY:

Begin with current or most recent employment.

Name of Employer: _____

Address: _____ City & Zip: _____

Type of Business: _____ Job Title: _____

Telephone No. () _____ Your Supervisor's Name: _____

Major Responsibilities: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Status: Full- Time Paid _____ Part-Time Paid _____ Volunteer _____

Reason for leaving: _____

May we contact this employer for a reference? Yes _____ No _____

Name of Employer: _____

Address: _____ City & Zip: _____

Type of Business: _____ Job Title: _____

Telephone No. () _____ Your Supervisor's Name: _____

Major Responsibilities: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Status: Full- Time Paid _____ Part-Time Paid _____ Volunteer _____

Reason for leaving: _____

May we contact this employer for a reference? Yes _____ No _____

Name of Employer: _____

Address: _____ City & Zip: _____

Type of Business: _____ Job Title: _____

Telephone No. () _____ Your Supervisor's Name: _____

Major Responsibilities: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Status: Full-Time Paid _____ Part-Time Paid _____ Volunteer _____

Reason for leaving: _____

May we contact this employer for a reference? Yes _____ No _____

Name of Employer: _____
Address: _____ City & Zip: _____
Type of Business: _____ Job Title: _____
Telephone No. () _____ Your Supervisor's Name: _____
Major Responsibilities: _____

Dates of Employment: From: _____ To: _____ Salary: _____
Status: Full- Time Paid _____ Part-Time Paid _____ Volunteer _____
Reason for leaving: _____
May we contact this employer for a reference? Yes _____ No _____

Salary Range Preferred _____

PROFESSIONAL REFERENCES:

List two persons, other than a supervisor and someone related to you, who have knowledge of your work abilities within the last five years.

Name: _____
Address: _____ City & Zip: _____
Occupation: _____
Daytime Telephone () _____ Years Known: _____

Name: _____
Address: _____ City & Zip: _____
Occupation: _____
Daytime Telephone () _____ Years Known: _____

Please read carefully and sign below.

I certify that I have not knowingly withheld any information that might affect my employment. I understand that, if I am hired, any false or misleading information provided in my application or interview(s) may result in termination.

I authorize Presentation Church, or his delegate, to investigate my references, work record, education and other matters related to my suitability for employment. I release the Diocese of Stockton, specifically Presentation Church, my former employers; and all other persons; from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

If hired, I agree to submit fingerprint cards for a Criminal Record Summary, if my position will have contact with children under the age of 18 or contact with vulnerable adults. I understand that, if hired, my employment is "at will." This means my employment is for no definite period of time. My employer can terminate me at any time, with or without cause or prior notice.

Applicant's Signature

Today's Date