



Archdiocese of Mobile Application for Employment

Parish/School/Entity _____ City _____

This Application will remain available for a period of three months after it is submitted. Any applicant who wishes to be considered for a position after that time period must submit another application.

Name _____

Address _____ Email _____

Daytime Phone (_____) _____ Other Phone (_____) _____

Are you a United States citizen or alien legally authorized to work in the United States? Yes No

Emergency Contact Person _____ Phone (_____) _____

Employment Desired

Position _____ Date you can start _____ Salary Desired _____

Are you under contract now? Yes No Full Time Part Time

Have you previously been employed by Archdiocese of Mobile? Yes No

If yes, what position? _____ Reason for leaving _____

Have you applied to this diocese before? Yes No Where? _____ When? _____

Who referred you to this location? _____

Education

School Level	Name and Location of School	No. of Yrs attended?	Did you graduate?	Subjects studied	Degree Received
Grammar School					
High School					
College					
Postgraduate School					
Trade, Business or Correspondence School					
Other Training					

Do you hold teaching certification or professional certification? Yes No

If teacher certification, rank and specialty or other endorsements _____

If you hold a state certification, date of certification and certifying agency

List any skills, talents, education, training or experience, other than that listed above, which qualifies you for the position you are seeking:

List three personal references you have known three years or more (not former employers).

1. Name _____

Address _____ Phone (H) (____) _____

City _____ State _____ Zip _____ Phone (W) (____) _____

2. Name _____

Address _____ Phone (H) (____) _____

City _____ State _____ Zip _____ Phone (W) (____) _____

3. Name _____

Address _____ Phone (H) (____) _____

City _____ State _____ Zip _____ Phone (W) (____) _____

General

Subjects of special study or research work _____

Special training _____

Special skills _____

Former Employers (List below three employers, starting with last one first).

1. Name and address of present or last employer.

_____ Phone (____) _____

Starting date _____ Ending date _____ Part Time Full Time

Month Year Month Year

Weekly starting salary _____ Weekly final salary _____

Job title _____ May we contact your supervisor? _____

Name and title of supervisor _____ Supervisor's email address _____

Description of work _____

Reason for leaving _____

2. Name and address of employer prior to 1.

Starting date _____ Ending date _____ Part Time Full Time

Month Year Month Year

Weekly starting salary _____ Weekly final salary _____

Job title _____ May we contact your supervisor? _____

Name and title of supervisor _____ Supervisor's email address _____

Description of work _____

Reason for leaving _____

3. Name and address of employer prior to 2.

Starting date _____ Ending date _____ Part Time Full Time

Month Year Month Year

Weekly starting salary _____ Weekly final salary _____

Job title _____ May we contact your supervisor? _____

Name and title of supervisor _____ Supervisor's email address _____

Description of work _____

Reason for leaving _____

Attach a copy of your resume. If no resume, initial here _____

Attach a photo (optional). If no photo, initial here _____

Any offer of employment is subject to the successful completion of a criminal background and reference check.

Applicant Signature Date

Applicant Marital Status Form

Date: _____

Full Name: _____

Address: _____

Email: _____

Telephone number: (____) _____

My religious affiliation: _____ Baptized Catholic

_____ Other (Please specify) _____

I am married. _____ Yes _____ No

If married:

My spouse's religious affiliation: _____ Baptized Catholic

_____ Other (Please specify) _____

Location of wedding: _____ City of wedding: _____

I have been married before. _____ Yes _____ No

If yes:

Former spouse's religious affiliation: _____ Baptized Catholic

_____ Other (Please specify) _____

Location of wedding: _____ City of wedding: _____

My current spouse has been married before. _____ Yes _____ No

If yes:

Religious affiliation of spouse's former spouse: _____ Baptized Catholic

_____ Other (Please specify) _____

Location of wedding: _____ City of wedding: _____