

St. Elizabeth Ann Seton  
509 W Division Rd  
Valparaiso, IN 46385

**EMPLOYMENT APPLICATION** Applicants requiring  
accommodation please notify the receptionist.

**PLEASE PRINT CLEARLY**

Date of Application \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Home Phone Number \_\_\_\_\_  
Alternate/Cell Number \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
Position Applying For: \_\_\_\_\_

What is the best time of day to call you at home? \_\_\_\_\_

May we call you at your work number? \_\_\_\_\_  
If yes, please provide your work number? \_\_\_\_\_

Have you previously applied for employment with the Diocese of Gary? \_\_\_\_\_

Have you ever worked for the Diocese of Gary? \_\_\_\_\_  
If yes, where and when did you work? \_\_\_\_\_

What type of work are you seeking (circle one): Full-time Part-time Temporary

If you selected part-time or temporary, please explain your availability:

\_\_\_\_\_  
\_\_\_\_\_

What is your desired salary range? \_\_\_\_\_ Are

you able to provide proof of your eligibility to work in the United States? \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_

If "yes", please explain: \_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT HISTORY** List your last three employers in order,  
beginning with the most recent.

Starting date \_\_\_/\_\_\_/\_\_\_ Ending date \_\_\_/\_\_\_/\_\_\_ End Rate of Pay \$ \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Your Responsibilities: \_\_\_\_\_

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

Name and job title of your supervisor: \_\_\_\_\_

Starting date \_\_\_/\_\_\_/\_\_\_ Ending date \_\_\_/\_\_\_/\_\_\_ End Rate of Pay \$ \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Your Responsibilities: \_\_\_\_\_

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

Name and job title of your supervisor: \_\_\_\_\_

Starting date \_\_\_/\_\_\_/\_\_\_ Ending date \_\_\_/\_\_\_/\_\_\_ End Rate of Pay \$ \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Your Responsibilities: \_\_\_\_\_

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

Name and job title of your supervisor: \_\_\_\_\_

Explain any gaps in employment:

**EDUCATION**

	<b>Name and Location of School</b>	<b>Course of Study or Major</b>	<b># of Years Completed</b>	<b>Diploma/ Degree</b>
<b>Elementary</b>				
<b>High School</b>				
<b>College</b>				
<b>Graduate</b>				
<b>Vocational</b>				

Explain any awards, certifications, memberships, training, or skills that you feel will be an asset to employment with the Diocese of Gary:

**PERSONAL REFERENCES**

Please do not list relatives as personal references. You may use employees of the Diocese of Gary.

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alternate phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alternate phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alternate phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Address: \_\_\_\_\_

List any other information you would like to have considered:

St. Elizabeth Ann Seton is an Equal Opportunity Employer. We consider all applicants without regard to race, color, religion, gender, national origin, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria. No part of this application will be used for the purpose of excluding or limiting any applicant's employment on any basis prohibited by local, state and federal law.

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**READ THE FOLLOWING STATEMENT CAREFULLY, THEN SIGN AND DATE THE STATEMENT.**

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I understand and agree that any misrepresentation or falsification by me in this application will be sufficient cause to cancel this application, and/or if I am employed by St. Elizabeth Ann Seton to cause termination of my employment.

I understand that I may resign at any time, and St. Elizabeth Ann Seton has the right to terminate my employment at any time with or without cause and without prior notice. I understand that no representative of the Diocese of Gary has the right or authority to make any claim to the contrary.

I give St. Elizabeth Ann Seton permission to investigate all references and secure additional job related information. I release from liability any representative of St. Elizabeth Ann Seton in seeking such information.

I understand that this application is current for only 90 days. At the conclusion of that time, if I wish to be considered for employment, I will need to make a new application.

Signature of Applicant: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_