



Diocese of Salt Lake City Application for Employment

The Catholic Diocese of Salt Lake City appreciates your willingness to share your faith, time and talents. Providing safe and secure programs for our employees and the communities we serve is of the utmost importance to us. The information gathered in this application is designed to help us secure a safe environment for the people of our community. For your privacy, this form will be stored in a secured locked facility.

The Diocese recruits, hires and promotes on the basis of merit, competence and qualifications, without being influenced by race, color, national origin, ancestry, physical disability, mental disability, medical condition, age, pregnancy, or veteran status. The Diocese reserves the right to be the sole judge of merit, competence, and qualifications, and it can favor Catholic applicants in all employment decisions based on religious preferences and other religious needs, criteria, and policies. Under its Safe Environment policy, no one will be knowingly assigned or retained to serve within the Diocese, or any other assignment, when that person is determined to have previously engaged in the sexual abuse of a minor.

Because of its mission to proclaim Christ's message through his church, the Diocese may seek to employ and retain personnel who share this vision.

PERSONAL

PLEASE TYPE OR PRINT CLEARLY

POSITION(S) APPLIED FOR:		DATE OF APPLICATION:	
HOW DID YOU LEARN ABOUT THE DIOCESE OF SALT LAKE CITY?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Employment Service	<input type="checkbox"/> Inquiry	<input type="checkbox"/> Friend <input type="checkbox"/> Relative <input type="checkbox"/> Other
Please specify:			
LAST NAME:	FIRST NAME:	MIDDLE NAME:	
ADDRESS:	CITY:	STATE:	ZIP:
TELEPHONE:	MOBILE PHONE:		
EMAIL :			

Are you legally eligible for employment in this country? Yes No

Have you ever applied with us before? Yes No

Have you ever worked with us before? Yes No

If yes, give date: _____ and position: _____

Do you have any friends or relatives that work with us? Yes No

If yes, give name: _____ relationship: _____ position: _____

Are you currently employed? Yes No

May we contact your employer?..... Yes No

Type of employment desired: Full Time Part Time Temporary Seasonal

Date available to begin work:

Are you able to meet the attendance requirements of the position? Yes No

WORK EXPERIENCE

(START WITH YOUR PRESENT OR LAST EMPLOYER.)

#1: FROM (MM/YYYY):	TO (MM/YYYY):	JOB TITLE:
EMPLOYER:	EMPLOYER TELEPHONE:	
EMPLOYER ADDRESS:		
IMMEDIATE SUPERVISOR & TITLE:		
NATURE OF WORK PERFORMED & RESPONSIBILITIES:		
REASON FOR LEAVING:		
PLEASE INDICATE FULL OR PART TIME STATUS:		

#2: FROM (MM/YYYY):	TO (MM/YYYY):	JOB TITLE:
EMPLOYER:	EMPLOYER TELEPHONE:	
EMPLOYER ADDRESS:		
IMMEDIATE SUPERVISOR & TITLE:		
NATURE OF WORK PERFORMED & RESPONSIBILITIES:		
REASON FOR LEAVING:		
PLEASE INDICATE FULL OR PART TIME STATUS:		

#3: FROM (MM/YYYY):	TO (MM/YYYY):	JOB TITLE:
EMPLOYER:	EMPLOYER TELEPHONE:	
EMPLOYER ADDRESS:		
IMMEDIATE SUPERVISOR & TITLE:		
NATURE OF WORK PERFORMED & RESPONSIBILITIES:		
REASON FOR LEAVING:		
PLEASE INDICATE FULL OR PART TIME STATUS:		

#4: FROM (MM/YYYY):	TO (MM/YYYY):	JOB TITLE:
EMPLOYER:	EMPLOYER TELEPHONE:	
EMPLOYER ADDRESS:		
IMMEDIATE SUPERVISOR & TITLE:		
NATURE OF WORK PERFORMED & RESPONSIBILITIES:		
REASON FOR LEAVING:		
PLEASE INDICATE FULL OR PART TIME STATUS:		

ENTER EXPLANATION OF ANY GAPS IN EMPLOYMENT THAT DO NOT PERTAIN TO PREGNANCY, CHILD CARE OR DISABILITY:
LIST BY NUMBER AND EXPLAIN ANY EMPLOYERS YOU WISH NOT TO BE CONTACTED:

EDUCATION

SCHOOL TYPE	NAME AND ADDRESS	COURSE OF STUDY	NUMBER OF YEARS COMPLETED	DIPLOMA / DEGREE
HIGH SCHOOL				
UNDERGRADUATE				
GRADUATE/ PROFESSIONAL				
OTHER/SPECIFY				

REFERENCES

DO NOT INCLUDE FAMILY MEMBERS

NAME AND ADDRESS	OCCUPATION / YEARS KNOWN	TELEPHONE NUMBER(S)

ADDITIONAL INFORMATION

DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP OR SKILLS:
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SPECIALIZED SKILLS

<input type="checkbox"/> PC <input type="checkbox"/> Word Processing <input type="checkbox"/> Spreadsheet <input type="checkbox"/> Typing Skills: wpm
OTHER JOB-RELATED COMPUTER PROGRAMS:
OTHER JOB-RELATED MACHINES OR MACHINERY:

OTHER PERTINENT INFORMATION

LIST ANY OTHER INFORMATION NOT COVERED TO BE CONSIDERED IN HIRING DECISION:

BACKGROUND CHECK INFORMATION

Have you changed your last name in the past 5 years? Yes No If yes, was the change due to a marriage/divorce? Yes No If yes, what was your previous last name?
.....

Have you ever been arrested for, charged with, convicted of or admitted to physically, sexually, or emotionally abusing or assaulting a child or an adult? Yes No If yes, explain _____

Have you ever been arrested for, charged with, convicted of or admitted to a misdemeanor or felony? Yes No If yes, please list the offense, date, jurisdiction and outcome. _____

Do you have any outstanding warrants, either in Utah or in any other state? Yes No If yes, list reason for warrant. _____

Is there anyone living in your home that is a registered sex offender, been accused of or is awaiting trial for a criminal offense against a child? Yes No If yes, explain. _____

The Diocese requires that all employees must complete the Safe Environment Program certification.

SAFE ENVIRONMENT PROGRAM REQUIREMENTS

Per the Diocese of Salt Lake City's Safe Environment compliance requirements, Safe Environment Certification is required for all Diocesan, Parish and Catholic School employees/staff. The requirement must be met prior to working in the Diocese, parish or school. Recertification is required every three (3) years.

Complete the Safe Environment Training and Background screening to fulfill this certification requirement through an online database at <https://saltlakecity.cmsconnect.org/>. Please note that certification can take 7 – 10 business days to complete due to background check processing timeframes. If you have questions, or need help, please contact the Pastoral Center, Parish or School where you are applying or contact the Office of Safe Environment at safeenv@dioslc.org . or call 801-328-8641.

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application shall be considered active for a period of time not to exceed ninety (90) days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the Diocese of Salt Lake City.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the Diocese of Salt Lake City.

SIGNATURE OF APPLICANT:

DATE:

(Applicant Signature)
