CATHOLIC DIOCESE OF SAVANNAH 601 E. Liberty St., Savannah, GA 31401-5196 Tel: 912-210-4100 Fax: 912-201-4101 Teachers please send your application directly to your school of interest. APPLICATION FOR EMPLOYMENT

Please complete this application and return it to the Diocese of Savannah at the above address. An incomplete application will eliminate your candidacy. Please note we comply with all applicable equal employment opportunity laws and do not discriminate in hiring, promotion, or other employment decisions on the basis of race, age, sex, color, disability, veteran status or national origin.

APPLICANT INFORMATION										
Last Name				First	First			M.I.	Date	
Street Address								Apartment/Unit #		
City				State	State			ZIP		
Phone				E-mail Address						
Date Available Religious			Affiliation Des			Desir	sired Salary			
Position Applied for										
Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO I]			
Have applied for employment here before? YES NO If so, when?										
Have you ever been convicted of a felony? YES				NO 🗌 If yes, explain						
Have you ever been employed by the Diocese, any Catholic parish or school, or other Catholic agency? YES 🗌 NO 🗌										
EDUCATION										
High School			Address							
From	То	Did you graduate?		YES 🗌	NO 🗌	Degree				
College			Address							
From	То	Did you graduate?		YES 🗌	NO 🗌	Degree				
Other				Address						
From	То	Did you graduate?		YES 🗌	NO 🗌	Degree	Degree			

REFERENCES				
Full Name	Relationship			
Company	Phone ()			
Address				
Full Name	Relationship			
Company	Phone ()			
Address				
Full Name	Relationship			
Company	Phone ()			
Address				

PREVIOUS EMPLOYMENT						
Company				Phone ()		
Address				Supervisor		
Job Title Starting Salary			Starting Salary	\$	Ending Salary \$	
Responsibilities						
From	То	Reason for Leaving				
May we contact your previous supervisor for a reference? YES				NO 🗌		
Company				Phone ()		
Address				Supervisor		
Job Title Starting Salary			\$	Ending Salary \$		
Responsibilities						
From	То	Reason for Leaving				
May we contact your previous supervisor for a reference? YES NO						
Company				Phone ()		
Address				Supervisor		
Job Title Starting Salary			\$	Ending Salary \$		
Responsibilities						
From	То	Reason for Leaving				
May we contact your previous supervisor for a reference? YES NO						

MILITARY SERVICE				
Branch	From To			
Rank at Discharge	Type of Discharge			
If other than honorable, explain				

DISCLAIMER AND SIGNATURE

I certify that the above information is true and complete to the best of my knowledge. I understand any statement I have furnished which is shown to be false will be cause for disregard of this application or will be cause for my immediate dismissal if I have been hired.

I understand that any offer of employment is contingent on my meeting the employment eligibility requirements of the Immigration Reform and Control Act.

I authorize the Diocese of Savannah to conduct any and all inquiries that it may deem necessary to verify the information provided by me and/or to supplement this information. I authorize the Diocese of Savannah to conduct a personal and professional background check for the purposes of my application.

I authorize any former employer, or any other person, firm, corporation, or government agency to provide the Diocese of Savannah with any information concerning me. In addition, I release such employer, firm, corporation, or government agency from any previous agreement, verbal or written, which would prohibit the release of information pertinent to my application for employment.

I understand that if I am employed by the Diocese of Savannah, I will be employed on an at-will basis, meaning that either the Diocese of Savannah or I will have the right to terminate the employment relationship at any time, with or without cause.

Signature