

Diocese of Erie

Office for the Protection of Children and Youth

Application for Employees Working with Children\Youth

Please print in ink

Please check one:	Parish Application		_ School Application	Date	
Name of Parish/School	ring:				
How did you learn of th	nis position?				
Applicant Information	1				
Name (first, middle, la	st)				
Address (street, city, s	tate, zip code)				
Phone Number(s)					
	ized to work in the Unite			0	
If not, your employme	ars old? □ Yes □ No ent will be subject to veri are applying for and have		•		equirements for
If yes, please explain 1 conviction will not nec	ed "guilty" or "no contest 1) nature of the crime, 2) cessarily bar you from em n sealed.)	date of o	conviction, and 3) stat nt. You should not disc	e and county in which close any information	
Have you ever applied	l here before? ☐ Yes	□ No	If yes, when:		
Have you ever worked	l here before? □ Yes	□ No			
If they have been expl	ained, are you able to m	eet the a	ttendance requireme	nts of the position?	
accommodation)? Thi provide information a necessary. These issue	m the essential functions s question is not designed bout the existence of a d es may be addressed at a	d to elici isability, later sta	t information about an particular accommod ge to the extent perm	n applicant's disability ation, or whether acco litted by law.	. Please do not
⊔ Yes ⊔ No ⊔ Ne	ed more information abo	out the Jo	ob s ressential function	is to respond.	

Education		
☐ High School ☐ High School ☐ 2yr Technical Graduate Equivalent	□ Some College	□ College Graduate
Name of Institution:		
□ Bachelors □ Masters □ Doctorate □ Other _		
Degree received:		
Employment History (Start with the most recent; use a s	separate sheet if necessary	.)
Name of employer	Telephone ()
Address		
Position/Title		
Employment dates (from-to)		
Name of supervisor		
Description of duties:		
Name of employer		
Address		
Position/Title		
Employment dates (from-to)		
Name of supervisor		
Description of duties.		
Name of employer	Telenhone (1
Address		
Position/Title		
Employment dates (from-to)		
Name of supervisor		
Description of duties:		

Required License(s) f required to drive a motor vehicle for the job applying for, fill in: Li)Driver's license number	Special Skills		
Required License(s) If required to drive a motor vehicle for the job applying for, fill in: Driver's license number	f relevant please describe any special	training, skills(including software knowled	ge), hobbies
Required License(s) f required to drive a motor vehicle for the job applying for, fill in: Li)Driver's license number			
f required to drive a motor vehicle for the job applying for, fill in: Driver's license number 2) State issued: 3) expires Are you licensed/have certifications which will assist in the job? Please explain:			
Required License(s) If required to drive a motor vehicle for the job applying for, fill in: 1) Driver's license number	of other and other Paters are also the		
1)Driver's license number	if relevant please list any groups, club	s, organizational memberships	
If required to drive a motor vehicle for the job applying for, fill in: 1)Driver's license number			
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If required to drive a motor vehicle for the job applying for, fill in: 1) Driver's license number			
1)Driver's license number		r the job applying for fill in:	
Are you licensed/have certifications which will assist in the job? Please explain:	·		
References: Please list three individuals familiar with your job qualifications. Name			
Please list three individuals familiar with your job qualifications. Name			
Please list three individuals familiar with your job qualifications. Name			
Please list three individuals familiar with your job qualifications. Name	References:		
Name			
Relationship Relationship How long known? Address Telephone Telephone Relationship How long known? Address	Please list three individuals familiar w	ith your job qualifications.	
How long known? How long known? Address Address Telephone Telephone Name Relationship How long known? Address	Name	Name	
Address Address Telephone Telephone Name Relationship How long known? Address	Relationship	Relationship	
Telephone Telephone Name Relationship How long known? Address	How long known?	How long known?	
Name Relationship How long known? Address	Address	Address	
Name Relationship How long known? Address			
Relationship How long known? Address	Telephone	Telephone	
Relationship How long known? Address	Name		
Address	Relationship		
	Address	 	
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All applicants (parish or school) must sign statement below:

All information in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired, regardless of when such information is discovered.

I authorize the named parish or school to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organizations providing information pertaining to me or my employment. I understand that upon receiving a job offer, a physical examination and drug screening may be required.

The named parish/school does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state or local laws. Within the provision of the First Amendment of the US Constitution however, we may require that due to the ministerial nature of the work to be performed, an applicant must be a practicing member of the Roman Catholic Church. In those cases, such requirement will be clearly stated in the position description and in any related advertisement for the particular job opening.

Regardless of whether or not I become employed by the named parish/school, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at the named parish/school is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the named parish/school's, unless specifically provided otherwise in a written employment contract. I further understand that no parish/school employee or representative has the authority to enter into a contract regarding duration of terms and conditions of employment other than an officer or official of the named parish/school and then only by means of a signed written document.

Signature of Applicant	Date				
To be completed by Supervisor: Approved for Employment □ No	□ Yes		(initials)	Date	

Revised: March, 2018