

EMPLOYMENT APPLICATION

Diocese of Little Rock ~ Office of Catholic Schools

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

P E R S O N A L	Last Name		First	Middle	Date	
	Street Address				Home Telephone ()	
	City, State, ZIP				Business Telephone ()	
	Have you ever applied for employment with us? _____ Yes _____ No		If yes: Month and Year	Location	Social Security #	
	Position Desired				Pay expected	
	Are you available for full-time work? _____ Yes _____ No		If not, what hours can you work?	Will you work overtime if asked? _____ Yes _____ No		
	Are you legally eligible for employment in the United States? _____ Yes _____ No		When will you be available to begin work? _____			
	Church affiliation					
Other special training or skills (languages, machine operation, etc)						

E D U C A T I O N	SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	NO. OF YEARS COMPLETED	DID YOU GRADUATE? ____ Yes ____ No	DEGREE OR DIPLOMA
	Graduate				____ Yes ____ No	
	College				____ Yes ____ No	
	Business/Trade/ Technical				____ Yes ____ No	
	High School				____ Yes ____ No	
	Elementary				____ Yes ____ No	

We may contact the employers listed below unless you indicate those you do not want us to contact.	DO NOT CONTACT	
	Employer Name _____	Reason _____
	Employer Name _____	Reason _____
	Employer Name _____	Reason _____

