

Overbrook School Application for Employment

PERSONAL DATA

Application Date: _____
Month Day Year

Applicant Name: _____
Last First MI

Social Security Number _____-_____-_____

Religious Affiliation: _____ Practicing Catholic? Yes No

Parish: _____

Job you are applying for: _____

Address	_____
	Street Apt #

	City ST Zip
Phone Number(s): Please give number or numbers where you can most easily be reached.	
hm:	_____
wk:	_____
cell:	_____
E-mail address:	_____

Are you seeking: ___ Full-time ___ Part-time ___ Temporary employment?

When could you start work? _____

Are you 18 years of age or older? YES NO
 (If you are hired, you may be required to submit proof of age for jobs with minimum age requirements.)
 If hired, can you furnish proof you are eligible to work in the U.S.? YES NO
 Have you ever been convicted of a felony, a misdemeanor, or any offense involving child abuse/molestation? YES NO

Has a civil or criminal complaint ever been filed against you alleging physical abuse or sexual abuse by you? YES NO

Have you ever terminated your employment or had your employment terminated for reasons relating to allegations of physical abuse or sexual abuse by you? YES NO

If you answered "yes" to any of the three previous questions, please attach an explanation.

Do you use illegal drugs? YES NO

Have you ever been convicted of or plead guilty or nolo contendere to a felony within the last five years? _____ Yes _____ No If yes, give details _____

WORK HISTORY

You may complete this section or attach a resume that answers this same information.

Have you ever applied at the Dominican Campus schools before? _____ Yes _____ No
If yes, when and where? _____

Have you ever been employed by a Dominican Campus school before? _____ Yes _____ No
If yes, when and where? _____

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. PLEASE GIVE MONTH AND YEAR.

Name of Employer:	Position and Duties:
Address:	Dates of Employment: From: _____ To: _____
City, State, Zip Code:	Pay: Start:\$ _____ Final: \$ _____
Supervisor: Telephone:	Reason for Leaving:
Name of Employer:	Position and Duties:
Address:	Dates of Employment: From: _____ To: _____
City, State, Zip Code:	Pay: Start:\$ _____ Final: \$ _____
Supervisor:	Reason for Leaving:

Telephone:	
Name of Employer:	Position and Duties:
Address:	Dates of Employment: From: _____ To: _____
City, State, Zip Code:	Pay: Start:\$ _____ Final: \$ _____
Supervisor: Telephone:	Reason for Leaving:
Name of Employer:	Position and Duties:
Address:	Dates of Employment: From: _____ To: _____
City, State, Zip Code:	Pay: Start:\$ _____ Final: \$ _____
Supervisor: Telephone:	Reason for Leaving:

Have you worked or attended school under any other name? YES NO
 If yes, give names: _____

Are you presently employed? YES NO

If yes, may we contact your present employer? YES NO

Have you ever been fired from a job or asked to resign? YES NO
 If yes, please explain: _____

List three references that are not relatives or former employers:

Name	Address	Phone

DRIVING JOBS ONLY:

Do you have a valid driver's license? YES NO

Driver's license number _____ Class of License: _____

Have you had your diver's license suspended or revoked in the last three years? YES NO

If yes, give details:

EDUCATIONAL DATA

High School or GED: _____

Vocational or Technical: _____

What skills or additional training do you have that are related to the job for which you are applying?

What machines or equipment can you operate that are related to the job for which you are applying?

Institutions of Higher Learning Attended

College/University	Location	Dates Attended	Credits/Sem. Hours	Credits/Qtr Hrs.

Degree(s) Attained

College/University	Degree	Dates Attended	Major	Minor

PROFESSIONAL DATA

Have you attended a Safe Environment Training Session? YES NO

If yes, please specify: Date: _____

Location: _____

PLEASE READ AND SIGN THE LAST PAGE OF THIS APPLICATION

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that the facts contained in the application are true and complete and without material omission to the best of my knowledge. I understand that, if employed, falsified statements on this application shall be grounds for immediate dismissal. I authorize the companies, schools or persons named above to give any information regarding my employment that is requested by the Dominican Campus and hereby release all such entities or persons from all liability for any damage that my result from furnishing the requested information to the Dominican Campus. I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time without any prior notice. I understand that neither this application nor my subsequent employment creates a contract for employment with the Dominican Campus, and I understand and acknowledge that any policies, procedures, handbooks or rules and regulations of the Dominican Campus do not create a contract of employment with the Dominican Campus and that my employment may be terminated at any time, with or without cause and with or without notice. I further understand that no representations made to me by representatives of the Dominican Campus shall constitute a contract of employment unless those representations are reduced to writing and signed by the school principal or her designee.

I HAVE READ, UNDERSTAND AND BY MY SIGNATURE CONSENT TO THESE STATEMENTS.

Signature: _____ Date: _____