

Archdiocese of Miami

Office of Catholic Schools

9401 Biscayne Boulevard

Miami Shores, FL 33138

(Tel) 305-762-1075 (Fax) 305-762-1115

Email, fax, or mail application to the school



APPLICATION FORM FOR A POSITION IN A CATHOLIC SCHOOL

In order to be considered for employment, this application must be filled out completely. Resumes and information posted at the Office of Catholic Schools website DO NOT satisfy the requirement of submitting this completed application. Send this document directly to the school

Date: _____

Name: _____
Last Name First Name Initial

Social Security Number: XXX-XX-__ __ __ __ (Provide the last 4 numbers)

Present Address: _____
Street City State Zip

How Long at Current address: ____ Years ____ Month(s) Email address: _____

Home Phone: _____ Other Telephone: _____

Position Desired: _____ Registered in _____ parish

Religion: _____

Other addresses, if any in the LAST SEVEN (7) years:

Previous Address _____

Previous Address _____

Criminal Background Screening

To ensure the safety and well-being of children and vulnerable adults, all employees will be required to undergo a background screening prior to employment and every five years thereafter while remaining employed. The screenings will include, but may not be limited to, fingerprint screening through local (FDLE) and/or national (FBI/VECHS) law enforcement databases. Employees may not begin employment until they receive clearance.

Any misinformation or deliberate withholding of pertinent information may be cause for terminating any agreement entered into as a result of this application.

EMPLOYMENT HISTORY

All information must be supplied on this application

Present or most recent employer: _____ Address: _____ Telephone: _____ May we contact at this time? Yes _____ No _____	Employed From: Employed To: Month ___ Year ___ Month ___ Year ___ Reason for Leaving: Name of Immediate Supervisor: _____ Telephone:
Position(s) Held:	Job Descriptions:

Previous employer: (if employed less than 10 yrs in above job) _____ Address: _____ Telephone: _____ May we contact at this time? Yes _____ No _____	Employed From: Employed To: Month ___ Year ___ Month ___ Year ___ Reason for Leaving: Name of Immediate Supervisor: _____ Telephone:
Position(s) Held:	Job Descriptions:

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Give full information, including dates:

EDUCATION:

School	Name and Location of Institution	Degree or Diploma Received	Year of Graduation	Major / Minor area of Study
High School				
Baccalaureate Studies				
Graduate Studies				

EDUCATOR CERTIFICATION

Subject Area	State Issued	Certificate #	Expiration Date

OTHER RELEVANT EXPERIENCE:

REFERENCES:

Name of Reference	Address	Daytime Phone	How long have you known this person?	Nature of Relationship

The Immigration Reform and Control Act of 1986 makes it unlawful for an employer to hire a person for employment in the United States if the person is not legally authorized to be employed. The Archdiocese of Miami will hire only United States citizens and aliens lawfully authorized to work in the United States.

Are you legally entitled to be employed in the United States? Yes No

If I am selected for employment, I agree to provide documentation establishing identity and employment authorization in accordance with the requirements of the law and any regulations thereunder.

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BACKGROUND QUESTIONS:

1. Has a criminal, civil or internal complaint to management or supervisors at places of employment/volunteering ever been filed against you which alleged sexual misconduct, harassment or child abuse by you, or your participation in or facilitation of such activities?

Yes _____ No _____

If yes, explain. Please provide the date, nature, and place of the incident leading to the complaint; where the complaint was filed; disposition of the complaint; and identify by name and title, the person(s) who investigated the complaint and the person who adjudicated the complaint.

2. Do you presently serve, or have you ever served as a volunteer for any organization, entity or group in which you had significant contact with children or other vulnerable populations (i.e. elderly, mentally or emotionally challenged, etc.)

Yes _____ No _____

If yes, please provide the name, address and telephone number of the organization, period of volunteer service, supervisor's name; and briefly describe your activities and/or duties.

3. Have you ever terminated any employment or volunteer service or chosen not to renew or continue any employment or volunteer service or have you ever had employment or volunteer service terminated, or been subject to any disciplinary action against you for reasons relating to allegations of sexual misconduct or child abuse by you?

Yes _____ No _____

If yes, please explain. Please include in your explanation the date, nature and place of the occurrence(s) or allegation(s) and the disposition of the matter(s). Also identify your employer and supervisor at the time by name, address and telephone number.

4. Have you ever entered a plea of guilty or nolo contendere or been convicted of a crime other than a minor traffic violation?

Yes _____ No _____

If yes, please explain. Please include in your explanation the date and place of any conviction and the crime for which you were convicted.

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5. Have you ever been registered in a pre-trial intervention program?

Yes _____ No _____

If yes, please explain.

7. Have you ever had a sealed or expunged record?

Yes _____ No _____

If yes, please explain.

8. Have you ever been reprimanded, investigated, or dismissed from a position for grounds that include or involve immoral conduct, unprofessional conduct, unethical conduct, harassment (including sexual harassment), unfitness for service, etc.?

Yes _____ No _____

If yes, please explain the incident(s) and provide the name(s) of the supervisor(s), telephone number(s) dates, etc.

9. Have you ever been a defendant in a civil action for an intentional tort, including but not limited to assault, false imprisonment, rape, etc.?

Yes _____ No _____

10. Is there anything that will prevent you from performing the essential functions of the position for which you are applying with or without reasonable accommodation?

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The information that I have provided may be verified, if necessary, by contacting persons or organizations named in this application, or by contacting any person or organization that may have information concerning me. I authorize the Archdiocese of Miami to make inquiries including criminal history and driving history. I hereby release and agree to hold harmless from liability any person or organization, who, in good faith, provides information to complete a background investigation. I also agree to release and hold harmless the local parish, school, Archdiocese of Miami, and the officers, employees, and volunteers thereof from any present or future claim of any kind, resulting from any alleged liability for conducting a background investigation which may include, but not limited to, criminal courts, state and county repositories or criminal records. In signing this application I affirm that the information I have given is true and correct. Furthermore, I understand that employment is contingent upon a background screening including a criminal background check.

Signature of Applicant: _____

Signature of Principal: _____

Date: _____

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