

Children of the Immaculate Heart
EMPLOYMENT APPLICATION

Position Applied For:

Full Time **Part Time:**

Shift Preference:

APPLICANT INFORMATION

Applicant Full Name:

Home Address:

City/State/Zip:

Number of years at this address:

Daytime phone: **Mobile phone:**

Do you have a California driver's license: **If no, what state?**

Driver's license number:

EDUCATION

High School Diploma

Date Completed (MM/YYYY):

School/Institution Name:

College Diploma

Date Completed (MM/YYYY): **Degree & Major:**

School/Institution Name:

University Diploma

Date Completed (MM/YYYY): **Degree & Major:**

School/Institution Name:

Employment History

List the last three (3) positions starting with the current:

Employer (1):	Job Title:	Dates Employed:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Work Phone:	Address:	City/State:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Reason for leaving:	Position Type:	
<input type="text"/>	<input type="text"/>	

Employer (2):	Job Title:	Dates Employed:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Work Phone:	Address:	City/State:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Reason for leaving:	Position Type:	
<input type="text"/>	<input type="text"/>	

Employer (3):	Job Title:	Dates Employed:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Work Phone:	Address:	City/State:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Reason for leaving:	Position Type:	
<input type="text"/>	<input type="text"/>	

References

List two (2) professional references:

Name:	Title:	Email:	Phone Number:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name:	Title:	Email:	Phone Number:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Character References

List two (2) references who can describe your character:

Name:	Relation to Applicant:	Email:	Phone Number:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name:	Relation to Applicant:	Email:	Phone Number:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Statement of Faith

Have you read and agree to abide by and uphold our statement of faith?

How did you hear about us?

COMMENTS:

I hereby declare that all statements contained in this application are true and correct and understand that false or inaccurate information in the application will be basis for termination.

Signature of Applicant

Date