

Christ the King ECDC
APPLICATION for EMPLOYEES and VOLUNTEERS

Date: _____

Name: _____ Maiden Name: _____

Security _____ - _____ - _____

Driver's License Number: _____ State: _____
(Copy of Social Security and Driver's License must be provided)

Address: _____
Street Address City State Zip Code

How long at current address: _____

Date of Birth (Month/Day/Year): _____/_____/_____

Phone: (_____) _____ (_____) _____
Home Cell

E-Mail: _____

Are you Catholic? Yes Other _____

Practicing Non-Practicing Home Parish _____

List your addresses in the past five years: _____

Position Applying For: _____

How did you hear about us? _____

What interests you about the position for which you are currently applying?

FOR OFFICE USE ONLY:

Interview Schedule: 1st _____ Interview Complete: _____ (Initial)

2nd _____ Interview Complete: _____ (Initial)

- DFPS Check FBI Check Copy of SS Copy of DL
- First Aid/CPR Yes No
- Character References

What has prepared you for the position for which you are currently applying?

When are you available to work?	Hours Available:		
Monday:	_____	_____	_____
Tuesday:	_____	_____	_____
Wednesday:	_____	_____	_____
Thursday:	_____	_____	_____
Friday:	_____	_____	_____
Pay Range Expected: _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Summer Only			
Date you are available to begin work: _____			
<input type="checkbox"/> I <u>CAN</u> be flexible with my schedule <input type="checkbox"/> I <u>CANNOT</u> be flexible with my schedule.			

Employment History

Dates of employment (Start with most Recent)	Company Name and Address (City, State, Zip)	Immediate Supervisor name and phone number	Position Held	Reason for leaving
Started: ____/____/____ Ended: ____/____/____				
Started: ____/____/____ Ended: ____/____/____				
Started: ____/____/____ Ended: ____/____/____				

May we contact former employers? Yes No

Educational History

Dates (Start with most recent)	School name & address (City, State and Zip)	Type of School	Name of Program or Degree	Program completed?

Volunteer Experience

Please list your volunteer experiences with other churches, civic or non-profit organizations (use back if needed)

Organization	Duties	Dates	Contact	Phone

References

If you have provided the Professional/Civic Character Reference form please check box

Reference Name	Address (City, State, Zip)	Daytime Phone	How long have you known this person?	Has this person agreed to provide a reference?
Professional/Civic				
Professional/Civic				
Personal				
Personal				
Family Member				

Have you ever been accused of physically, sexually, or emotionally abusing a child or an adult?
 If yes, Please explain.

The Catholic Diocese of Lubbock, the Catholic Church of West Texas, appreciates your willingness to share your faith, gifts, and skills. Providing safe and secure programs for our members is of utmost importance to us. The information gathered in this application is designed to help us provide the highest quality Catholic programs for the people of our community.