Roman Catholic Diocese of Syracuse

Diocesan Location: Catholic Charities of Oneida-Madison Counties

Application for Employment

Note: This form is to be completed by any individual who is currently employed or is applying to be an employee in any parish, institution, office, school or program sponsored by the Diocese of Syracuse, or its related agencies.

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Last Name	First	Middle		.Do you ha	ave a valid rs License?	Date
Is additional information relative to a name change or nickname necessary to check on your work records? If Yes, please explain:					No	
Present Street Add	ress City	State	Zip	Daytime P	hone	
				Evening P	hone	
Permanent Address (If different from present address)					e No.	
				E-Mail Add	dress	
Have you ever bee	n an employee or volunteer at any	Diocesan location, incl	uding in the	Are you 18	3 years of age o	r older?
	se? Yes No	·	J		<u> </u>	state your age
If yes, give details:						
Area of Interest::						
Catholic Char	ities					
The Position(s) that I am applying for: 1), 2), 3), 3)						
I am interested in employment opportunities: Full-Time Part-Time Date available:						
I am an U. S. Citize	en or have the legal right to accept o	employment in the U.S.	Yes	No		
Have you ever received Child and Youth Protection Training (when/where/by whom)?						
<u>I would like inform</u>	ation on the following:	<u></u>			_	
ı <u>—</u>		Catholic Schools Re	•	ation 💹 Y	outh Ministry L	CYO or Coaching
ı —	e Sick Liturgical Ministry M	<u> </u>	san Office			
Other(s)						
	Name and location of School	 I		ars/Credit ompleted	Minor/Major a	and Degree Received
High School				oloma		
ingii concoi			☐Ye			
College						
Postgraduate School						
Other training						
-						
Are you currently related to an existing Catholic Charities employee? Yes No If yes, please indicate the name of the employee:						

The Diocese of Syracuse commits itself to a continued policy that there be no unlawful discrimination because of race, color, sex, national origin, marital status, an individual's disabilities, age, criminal record, genetic predisposition, or carrier status. This policy will apply to all situations, which oversee the consideration and movement of personnel. EMPLOYMENT and VOLUNTEER ACTIVITIES – Please list all present and former employment and volunteer activities beginning with your present or most recent position. Use additional pages if needed. If you desire, you may attach a resume or curriculum vitae.							
Company/Organization Name		Phone					
Address		() When (Month & Year)					
Title	Paid or Volunteer	From To Reason for leaving					
	Palu di volunteei	Reason for leaving					
Duties							
Company/Organization Name		Phone					
Address		When (Month & Year)					
Title	Paid or Volunteer	From To					
	Paid of volunteer	Reason for leaving					
Duties							
Company/Organization Name	1	Phone					
Address		When (Month & Year) From To					
Title	Paid or Volunteer	Reason for leaving					
Duties							
Company/Organization Name	1	Phone ()					
Address		When (Month & Year) From To					
Title	Paid or Volunteer	Reason for leaving					
Duties							
Have you corred in the Armod Farces of the	United States? Vec No. Branch	Deried of Active Duty to					
Have you served in the Armed Forces of the United States? Yes No Branch Period of Active Dutyto							
Position at Discharge Date of Final Discharge							
for less than 2 years, please provide at least	essional references including your most recent one reference from your previous area of residence Phone No. ()_	ence.					
Email Address:							
2- Name: Title:	Phone No. ()_	-					
Fmail Address:							

3- Name: Phone No. ()					
Title:					
Email Address:					
If you have special skills to share please complete the following, where applicable:					
Prayer Leader Biblical Studies Medical Professional Counselor Law/Law Enforcement					
Marketing/Sales Music/Art Computer, which skills? Retreat Team Teacher/Trainer					
Carpentry/Plumbing Development/Finance Program Design Language Other:					
IMPORTANT – PLEASE READ THIS					
All applicants <u>must</u> complete question IV. You <u>must</u> complete questions I, II, & III <i>only if</i> the position(s) for which you are applying will involve contact with children or other vulnerable individuals, i.e. elderly, mentally or emotionally handicapped, etc. Such positions include but are not limited to coaching, counseling, maintenance, religious education, youth ministry, and service/ministry to anyone under the age of 18.					
I. Has a civil complaint ever been filed against you that alleged <i>sexual misconduct or child abuse</i> by you or your participation in or facilitation of such activities (including internal complaints given to management or supervisors at places of employment)? 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.					
II. Do you presently serve, or have you ever served, as a volunteer for any organization, entity or group in which you had contact with children or other vulnerable populations (e.g., elderly, mentally or emotionally handicapped, etc.)? Yes No					
If yes, please provide the name, address, and phone number of the organization, period of volunteer service, supervisor's name; and briefly describe your activities and/or duties.					
III. Have you ever chosen not to renew or continue any employment or volunteer service, had your employment or volunteer service terminated, or been subject to any disciplinary action, 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 allegations(s) and the disposition of the matter(s). Also, identify your employer and supervisor at the time by name, address and					

telephone number.					
IV. Have you ever been convicted of a criminal offense (felony or misdemeanor)?					
If yes, please explain. Please include in your explanation the date and place of any conviction, and the crime for which you were convicted.					
IMPORTANT: By my signature below, I certify that the information provided in this application is true, correct ar complete. If employed or accepted as a volunteer, any misstatement or omission of fact on this application may result in n dismissal. I grant permission to check my background and references and release the <i>Diocese of Syracuse</i> and Diocesa locations from any and all resultant liability. If welcomed as an employee, I will abide by the "Child and Youth Protectic Policy and the other policies and procedures of the <i>Diocese of Syracuse</i> . I understand that acceptance of an offer of volunteer does not create any obligation upon the diocese to permit my continuing service.					
I further understand that while not all positions are security sensitive I acknowledge that all persons who will have contact with children are required to undergo a criminal background check and "Child and Youth Protection Training."					
I will be required to furnish proof of identity in association with the Criminal Background Check.					
Signature:Date:					
To this application please attach your resume and a letter of introduction If you have other skills that will aide you in this role please list them:					
you have only only on a sum and you in and lose process not under					
Any correspondence, interview notes and the results of the criminal background check and reference checks will be filed with this application.					
FOR STAFF:					
This application for employment was received on (date) at					
(Location)					

Ciana Atras	
Signature	Date
Actions taken in regard of this Application:	
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