

DATE RECEIVED

**BECKMAN CATHOLIC HIGH SCHOOL**  
**APPLICATION FOR EMPLOYMENT**

**PERSONAL DATA**

FULL NAME—LAST	FIRST	MIDDLE
PRESENT ADDRESS—STREET	CITY	STATE ZIP
EMAIL ADDRESS	TELEPHONE	
LAST 4 OF SOCIAL SECURITY NUMBER	ARE YOU A CITIZEN OF THE U.S. OR CAN YOU SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Upon receipt of a conditional offer of employment, you must be able to submit verification of your legal right to work in the United States.		

**GENERAL INFORMATION**

POSITION APPLYING FOR	SALARY REQUIREMENTS	DATE AVAILABLE
HAVE YOU EVER BEEN CONVICTED OF A FELONY? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PLEASE EXPLAIN	
If hired, do you expect to have additional jobs elsewhere? <input type="checkbox"/> YES <input type="checkbox"/> NO		

**EDUCATION**

SCHOOLS ATTENDED	NAME OF SCHOOL	CITY/STATE	CREDIT/DEGREE
High School			
College			
Graduate School			
Other Schools			

NOTE: All degrees listed above may require written verification prior to employment.

## WORK HISTORY

BEGIN WITH MOST RECENT EMPLOYER

EMPLOYER	DATES		NAME EMPLOYED UNDER
	FROM (MO/YR)	TO (MO/YR)	
ADDRESS	SALARY		POSITION TITLE
	STARTING	FINAL	
CITY, STATE AND ZIP	WEEKLY SCHEDULED HOURS		DUTIES
PHONE NUMBER	MAY WE CONTACT YOUR EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		REASON FOR LEAVING
	IMMEDIATE SUPERVISOR		

EMPLOYER	DATES		NAME EMPLOYED UNDER
	FROM (MO/YR)	TO (MO/YR)	
ADDRESS	SALARY		POSITION TITLE
	STARTING	FINAL	
CITY, STATE AND ZIP	WEEKLY SCHEDULED HOURS		DUTIES
PHONE NUMBER	MAY WE CONTACT YOUR EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		REASON FOR LEAVING
	IMMEDIATE SUPERVISOR		

EMPLOYER	DATES		NAME EMPLOYED UNDER
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ADDRESS	SALARY		POSITION TITLE
	STARTING	FINAL	
CITY, STATE AND ZIP	WEEKLY SCHEDULED HOURS		DUTIES
PHONE NUMBER	MAY WE CONTACT YOUR EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		REASON FOR LEAVING
	IMMEDIATE SUPERVISOR		

Use this space to describe any volunteer experience, skills or special training, educational honors; extracurricular activities; professional societies or other information you wish considered.

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### OFFICE SKILLS

SOFTWARE KNOWLEDGE (Circle and/or list)				
<input type="checkbox"/> Excel	PowerPoint	Word	Microsoft Publisher	Other _____
INTERNET AND SOCIAL MEDIA:				
Facebook	Twitter	Website Content Management	<input type="checkbox"/> Other _____	

### PROFESSIONAL REFERENCES

Please provide at least three business or professional references. Family may not be listed as a reference.

NAME	ADDRESS	PHONE

### PLEASE READ CAREFULLY BEFORE SIGNING

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize the references listed in this Application, including personal and employment references, to provide you with all information pertinent to this Application and I release all parties from liability for any damages that may result from the release of any information as a part of the employment verification process. I understand Beckman Catholic High School (the School) may perform criminal background checks on all potential new hires prior to offering employment to an applicant and that if such back ground check reveals a criminal charge or conviction, the School may choose not to hire me. If my employment with the School requires a current, unrestricted driver’s license, I authorize the School to obtain information from the Iowa Department of Transportation verifying that I have a current, unrestricted driver’s license.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the School and myself for either employment or for the providing benefit. No promises regarding employment have been made to me, and I understand that no promise or guarantee is binding upon the School unless made in writing. Further, I understand that Iowa is an employment-at-will state, as such, my employment may be ended by either me or my employer at any time with or without cause. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the School, and that, if employed, my employment is at will and that I have the right to terminate my employment at any time for any reason and that the School retains the same right.

I understand and agree that in accordance with Federal Law, I must provide proof of identity and proof of eligibility to work in this country upon the event of employment.

SIGNATURE OF APPLICANT	DATE
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