



# The Atonement Catholic Academy

## **APPLICATION FOR EMPLOYMENT**

The application form must be completed in its entirety. If questions are not applicable, enter "NA". Do not leave questions blank. Your signature and date of completion are required. The Atonement Catholic Academy is an Equal Opportunity Employer. However, because we are part of the Roman Catholic Church, some positions may only be available to Roman Catholics who are in good standing with the Catholic Church.

### **SECTION I: Applicant Information:**

Legal Name: *(First, Middle, Last)* \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**List previous address, if at present address less than 2 years:**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

List any other names used if different from name on this application \_\_\_\_\_

Home Phone Number: ( ) - Work Phone Number: ( ) -

Personal Email Address: \_\_\_\_\_

### **SECTION II: Applicant Availability:**

Position Applied for: \_\_\_\_\_

Date Available to Begin Employment: \_\_\_\_\_

☐ Full-Time ☐ Part-Time What days are you available to work? \_\_\_\_\_

Are you willing to work hours other than 8:00 am – 5:00 pm? ☐ Yes ☐ No

### **SECTION III: Applicant Background Information:**

**Applicants must submit a background check, fingerprint check, and driving check for criminal record, and receive an approval clearance prior to employment.**

Are you at least 18 years old? ☐ Yes ☐ No

Are you eligible to work in the United States?  
(Proof of eligibility will be required upon employment) ☐ Yes ☐ No

Have you been convicted of a felony or been released from incarceration for a felony? ☐ \*Yes ☐ No

\*If yes, please explain. (Please note that an affirmative response to the above question will not necessarily bar you from employment.)



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## **SECTION IV: Applicant Roman Catholic Identity:**

**The position you are applying for may require membership in a Roman Catholic parish or faith community. Please identify your parish/community and include city and state.**

Parish/Community Name: *(include City and State)* \_\_\_\_\_

Have you previously been employed by the Personal Ordinariate of the Chair of St. Peter, Catholic Diocese of Victoria or any of its parishes, schools, or other entities?

☐ Yes ☐ No If yes, list entity, dates, supervisor and reason for leaving: \_\_\_\_\_

## **SECTION V: Applicant Skills:**

Do you speak a language other than English? ☐ Yes ☐ No What language(s)? \_\_\_\_\_

How fluent? ☐ Fair ☐ Good ☐ Excellent

Do you write in a language other than English? ☐ Yes ☐ No What language(s)? \_\_\_\_\_

How fluent? ☐ Fair ☐ Good ☐ Excellent

Approximately how many words per minute do you type? \_\_\_\_\_

List all job related training or skills you possess and machines or office equipment you can use.

## **SECTION VI: Applicant Education:**

**Applicants may be required to provide proof of diploma, degree, transcripts, licenses, certifications upon employment.**

Type of School	Name & Address of School	Dates Attended From/To	Date Graduated	Degree Received
College				
College				
Technical, Vocational, or Business School				
High School				



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## **SECTION VII: Applicant Current and Previous Employment:**

**List most current employment first followed by previous employment and include periods of unemployment.**

Name of Organization: \_\_\_\_\_ Job Title: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Address (Street, City, State): \_\_\_\_\_

Phone Number: ( ) - \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Employment Status: ☐ Full-Time ☐ Part-Time ☐ Other: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Duties and Responsibilities: \_\_\_\_\_

Name known by (if different than present name): \_\_\_\_\_

Name of Organization: \_\_\_\_\_ Job Title: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Address (Street, City, State): \_\_\_\_\_

Phone Number: ( ) - \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Employment Status: ☐ Full-Time ☐ Part-Time ☐ Other: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Duties and Responsibilities: \_\_\_\_\_

Name known by (if different than present name): \_\_\_\_\_



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Name of Organization: \_\_\_\_\_ Job Title: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Address (Street, City, State): \_\_\_\_\_

Phone Number: ( ) - \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Employment Status: ☐ Full-Time ☐ Part-Time ☐ Other: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Duties and Responsibilities: \_\_\_\_\_

Name known by (if different than present name): \_\_\_\_\_

Name of Organization: \_\_\_\_\_ Job Title: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Address (Street, City, State): \_\_\_\_\_

Phone Number: ( ) - \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Employment Status: ☐ Full-Time ☐ Part-Time ☐ Other: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Duties and Responsibilities: \_\_\_\_\_

Name known by (if different than present name): \_\_\_\_\_



# The Atonement Catholic Academy

Name of Organization: \_\_\_\_\_ Job Title: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Address (Street, City, State): \_\_\_\_\_

Phone Number: ( ) - \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Employment Status: ☐ Full-Time ☐ Part-Time ☐ Other: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Duties and Responsibilities: \_\_\_\_\_

Name known by (if different than present name): \_\_\_\_\_

## **SECTION VIII: Applicant References:**

We may contact current and previous employers listed above. If you would prefer we not please indicate the following:

Name of employer(s): \_\_\_\_\_

Reason: \_\_\_\_\_

Provide names, address and telephone number of three professional references.  
(Do not include relative or previous supervisors.)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

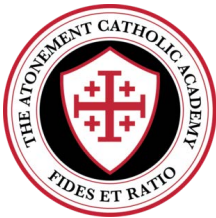
## **SECTION IX: Applicant Statement of Strengths:**

Provide your strengths that you would bring to the position if hired?

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# The Atonement Catholic Academy

## **SECTION X: Applicant Acknowledgement and Signature:**

How did you hear about this available position? \_\_\_\_\_

### **PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED**

1. I certify that all of the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information may be grounds for refusal to hire, or if hired, termination.
2. I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the United States.
3. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous application, and I release all such parties from all liability from any damages which may result from furnishing such information to you.
4. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.
5. If you decide to engage an investigative consumer reporting agency to report on my credit and personal history, I authorize you to do so. If a report is obtained you must provide, at my request, the name and address of the agency so I may obtain from them the nature and substance of the information contained in the report.
6. I authorize The Atonement Catholic Academy to conduct a criminal background check, arrest records check, abuse registry check, fingerprint check, and driving record check as a condition of my employment.
7. I understand that a criminal background check will be conducted prior to and during my service. I authorize investigations of all statements contained in this application.
8. I agree to observe all of The Atonement Catholic Academy guidelines and policies for the position I am applying for.
9. I understand that The Atonement Catholic Academy has a ZERO TOLERANCE FOR ABUSE and takes all allegations of abuse seriously. I further understand that the The Atonement Catholic Academy cooperates fully with the authorities to investigate all cases of alleged abuse. Abuse of minors or vulnerable adults is grounds for immediate termination and possible criminal charges.
10. I understand that I may withdraw from the application process at any time.
11. I understand and agree that false statements and/or omissions regarding past conduct and/or present situations may be grounds for denial of employment and that refusal to inform The Atonement Catholic Academy of the contents of a sealed criminal record will result in the automatic denial of the application.
12. My signature indicates that I have read and understand the above.
13. My signature indicates that I have reviewed this application and have noted any missing information.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **SECTION XI: Submission of Employment Application and/or Questions:**

**Submit Completed Applications to:**

**For Questions Contact:**

Email: [jobs@ourladyoftheatonement.org](mailto:jobs@ourladyoftheatonement.org)

Email: [jobs@ourladyoftheatonement.org](mailto:jobs@ourladyoftheatonement.org)