Name:	Position:



# Archdiocese of Indianapolis

### Mission Statement of the Archdiocese of Indianapolis

We the Church in Central and Southern Indiana, called to faith and salvation in Jesus Christ in the Roman Catholic tradition, strive to live the Gospel by:

- Worshiping God in word and sacrament
- · Learning, teaching and sharing our faith
- Serving human needs

We commit ourselves to generosity and to the responsible use of our spiritual and material resources.

### **Values**

- · Prayer and spiritual growth
- · Life-long learning and sharing our faith
- · Parish and family, the individual and community
- · Justice and consistent moral standards
- Pro-active leadership and shared responsibility
- Vital presence in urban, suburban, and rural neighborhoods
- Stewardship

### Goals

- · Foster spiritual and sacramental life
- Teach and share Catholic belief, traditions, and values
- Provide for the pastoral and leadership needs of the people of the Archdiocese
- Work for peace and social justice through service and advocacy
- · Promote generous sharing and responsible use of all human and material

#### resources

In compliance with federal and state equal opportunity laws, qualified applicants are considered for all positions without regard to race, color, sex, national origin, age, marital status, ancestry, or the presence of a disability, which with or without reasonable accommodation does not impair performance of essential job duties.

Name:	(Direct)	(Middle Initial)	social Security #:		
		(middle illidal)			
City:			State: Zip C	ode:	
Position Applied For	:	Salary Expected:	Date Availal	ble For Work:	
BACKGRO	UND INFORMAT	ION			
Please note conse	nt to investigate background	d on the last page.		YES	NO
. Are you a U.S. cit	izen or an alien legally eligible	e to work in the U.S.?			
2. Were you ever co	nvicted of a felony or a misde	meanor (other than a minor traffic viola	tion)?		
	pending criminal charges? a crime and/or pending charg	ges will not automatically preclude emplo	oyment.)		
4. Has any law enfo	rcement or child protection ag	gency ever determined that you have abu	sed a child?		
5. Have you ever be	en subjected to a civil protecti "yes" to question 2, 3,4, or 5,	gency ever determined that you have abuse?  please explain.	?		
5. Have you ever be  If you answered	en subjected to a civil protecti "yes" to question 2, 3,4, or 5,	ive order for domestic violence or abuse?  please explain.	?		
5. Have you ever be  If you answered	en subjected to a civil protecti "yes" to question 2, 3,4, or 5,	ive order for domestic violence or abuse?  please explain.	?		
5. Have you ever be  If you answered	en subjected to a civil protecti "yes" to question 2, 3,4, or 5,	ive order for domestic violence or abuse?  please explain.	CIRCLE LAS	T' DEC	
5. Have you ever be If you answered	en subjected to a civil protecti "yes" to question 2, 3,4, or 5, 1	please explain.  JND  ADDRESS	CIRCLE LAS	T' DEC	
5. Have you ever be If you answered  EDUCATIO  High School	en subjected to a civil protecti "yes" to question 2, 3,4, or 5, 1	please explain.  JND  ADDRESS	CIRCLE LAS' YEAR COMPLE	T' DEG	
5. Have you ever be If you answered  EDUCATIO  High School  College	en subjected to a civil protecti "yes" to question 2, 3,4, or 5, 1	please explain.  JND  ADDRESS	CIRCLE LAS' YEAR COMPLE' 1 2 3	T DEG	
5. Have you ever be If you answered	en subjected to a civil protecti "yes" to question 2, 3,4, or 5, 1	please explain.  JND  ADDRESS	CIRCLE LAS' YEAR COMPLE  1 2 3  1 2 3	T' DEG	

## **WORK EXPERIENCE**

List all employment starting with present or most recent employer. Account for all periods, including unemployment and service with U.S. Armed Forces. Also include relevant voluntary and/or part-time work experience. Use additional sheets if necessary.

1)	1) Organization Name:	
ĺ	Address:	
		Final Salary:
		n for Leaving:
	Description of your Work:	
	Name/Title of Supervisor:	
2)	2) Organization Name:	
	Address:	
		Final Salary:
	Last Position Held: Reaso	n for Leaving:
	Description of your Work:	
	Name/Title of Supervisor	
	Name/ file of Supervisor.	
3)	3) Organization Name:	
-,		
		Final Salary:
		n for Leaving:
	Description of your Work:	
	Name/Title of Supervisor:	
4)		
		Final Salary:
		n for Leaving:
	Description of your work:	
	Name/Title of Supervisor	
	Time, Time of output thous	

MILITARY SERVICE RECORD					
Are you now or were you ever	in the U.S. Armed Forces, Reserv	ves or National Guard?: 🗆 Yes 🕒 No	If yes, what branch:		
Dates of Duty: From	To	Rank:			
List Duties in the Services, inc	luding Special Training:				
If discharge was dishonorable,	explain. Individual circumstance	s will be considered.			
Ç	•				
REFERENCES (W	ork or Professional)				
	NAME	OCCUPATION	PHONE NUMBER		
•	,				
Were you referred to us by an	employment agency?	If so, whom?			
duties as an employee of The Arc contract or other agreement to be I understand that any employment Control Act of 1986.  I understand that, if employed, the any time, without notice or cause authorized representative of my expractices relating to wages, hours. The information contained in this mation I have provided in this appreciation and information I have protion and information checks with Child Protective Services, credit by fellow employees, educational and	thdiocese of Indianapolis or any of its a ring an action against me in the event at or offer of employment is contingent at application does not constitute an early anotwithstanding any oral or written se employer. I further understand that my a benefits, or other terms and condition application is true and correct to the application will result in my discharge shall be ovided in this application. This informate the Social Security Administration, crin cureaus, and employer mutual association at training institutions, and any other per e all such persons from any liability for	that I accept employment with The Archdioceses to on my meeting the employment eligibility requiremployment contract and that either I or my entertatements by either party unless set out in write employer may at its discretion, modify, amend as of employment.  The best of my knowledge. I understand that any famould I be employed by the Archdiocese. I furth	a has a contractual right under any employment e of Indianapolis or any of its agencies.  The indianapolis or any such employment at ting, dated, and executed by both me and and or terminate present or future policies or alsification or misrepresentation of this informer authorize you and any interested party to so, educational and training institutions, verification or previous employers, present or previous my personal character, habits or employment		
Signed	Date	WITNESS			