



701 Lawrenceville Road  
Trenton, NJ 08638

**APPLICATION FOR EMPLOYMENT**

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

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Number Street City State Zip Code

Phone No.: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Business Address: \_\_\_\_\_ Business Tel No: \_\_\_\_\_  
\_\_\_\_\_

If hired, can you provide proof that you are eligible to work in the United States?  Yes  No

If you are under 18 years of age, can you provide required proof of your eligibility to work?  Yes  No

Are you presently employed?  Yes  No If so, may we contact your employer?  Yes  No

Position(s) applying for: \_\_\_\_\_

Would you work:  Full-Time  Part-Time  Summer or Temporary  
If offered a position, on what date would you available to work? \_\_\_\_\_

Are you on a lay-off and subject to recall?  Yes  No Can you travel if a job requires it?  Yes  No

Specify days and hours available: \_\_\_\_\_

Have you previously been employed by any parish, school or church in the Diocese of Trenton or any other diocese in the State of New Jersey?  Yes  No

If so, please list employment dates, position and reason for leaving: \_\_\_\_\_

Have you previously applied for employment by any parish, school or church in the Diocese of Trenton or any other diocese in the State of New Jersey?  Yes  No

If so, when, where and for what position(s)? : \_\_\_\_\_

Provide names, address and phone numbers of three professional references not related to you:

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

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

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

Are you able to perform the essential functions of the job for which you are applying, with or without accommodation?

Yes  No

If you checked yes because an accommodation is necessary, please state the accommodation needed:

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of or plead guilty or no contest to a felony or a misdemeanor?  Yes  No

If YES, explain in full, indicating date, charge, place and under what name and action taken:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employment Experience

List each job held from most recent to least recent. You are welcome to attach additional sheets of paper, if needed. Start with your present or last job. Include previous job-related military service assignments and volunteer activities.

Employer	Dates FROM                      TO	JOB TITLE AND WORK PERFORMED
Address		
Supervisor's Name:	Hourly Rate / Salary Starting:                      Final:	Reason for Leaving:

Employer	Dates FROM                      TO	JOB TITLE AND WORK PERFORMED
Address		
Supervisor's Name:	Hourly Rate / Salary Starting:                      Final:	Reason for Leaving:

Employer	Dates FROM                      TO	JOB TITLE AND WORK PERFORMED
Address		
Supervisor's Name:	Hourly Rate / Salary Starting:                      Final:	Reason for Leaving:

Summarize Special Skills Qualifications Acquired from Employment or Other Experience:

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**RECORD OF EDUCATION**

School	Name & Address	Course of Study	Last Year Completed	List Degree
Elementary			5 6 7 8	
High			1 2 3 4	
College			1 2 3 4	
Other (Specify)			1 2 3 4	

HONORS RECEIVED (Professional and Educational):

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If I am employed, in consideration thereof I agree to conform to the rules and regulation of Parish and Cemetery. I recognize, understand and agree that any compensation or benefits I receive from Catholic Cemeteries for the Diocese of Trenton (CCDOT) can be terminated and/or altered with or without cause and with or without notice, at any time, at the option of management.

Initial: \_\_\_\_\_

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

Initial: \_\_\_\_\_

I authorize investigation of all statement contained in this application for employment as may be necessary in arriving at an employment decision. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I also agree to permit CCDOT to conduct substance abuse tests and for other background investigative procedures it deems appropriate with respect to my application and, in the event of hire, while employed.

Initial: \_\_\_\_\_

I understand that I will only be considered an applicant of CCDOT upon completing an application for a position for employment in response to a listed job opening.

Initial: \_\_\_\_\_

In the event of employment, I understand that false, incomplete or misleading information given on my resume, in my application, or in my interview(s) may result in discharge.

Initial: \_\_\_\_\_

NOTHING ON THIS APPLICATION IS INTENDED TO CREATE OR IMPLY AN EMPLOYMENT RELATIONSHIP OR A CONTRACT FOR EMPLOYMENT. IF HIRED, THE EMPLOYEE UNDERSTANDS THAT THE EMPLOYMENT IS AT-WILL, THAT IS IT NOT FOR ANY SPECIFIC PERIOD OR DURATION, AND CAN BE TERMINATED WITH OR WITHOUT REASON AT ANY TIME. WHILE EMPLOYMENT POLICIES OR PROCEDURES MAY CHANGE FROM TIME TO TIME AT CCDOT'S OPTION, ONLY A WRITTEN AGREEMENT SIGNED BY THE DIRECTOR OF CCDOT CAN CHANGE THE EMPLOYEE'S AT-WILL STATUS.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

