

Catholic Charities of Cortland County

Application for Employment

33-35 Central Avenue
Cortland, New York 13045

Date: _____

We appreciate your interest in employment with our Agency. Please answer all questions and sign this application.

We are an Equal Opportunity Employer and do not discriminate on the basis of race, color, religion, gender, gender identification, national origin, age, disability, sexual orientation, genetic information, veteran or military status, or any locally mandated classification.

Applicant's Last Name		First Name		Middle	Do you have a valid New York State Driver License? <input type="checkbox"/> Yes <input type="checkbox"/> No	
_____		_____		_____		
Have you ever used a different name, including alias, maiden, or married? <input type="checkbox"/> Yes <input type="checkbox"/> No						
If yes, list all prior names: _____						
Local Mailing Address		City		State	Zip Code	Phone Number
_____		_____		_____	_____	_____
Permanent Address, if different		City		State	Zip Code	E-mail Address
_____		_____		_____	_____	_____
Have you ever been an employee or volunteer at any diocesan location, including the Diocese of Syracuse, Toomey Residential, or Christopher Community? <input type="checkbox"/> Yes <input type="checkbox"/> No						If you are under the age of 18, can you furnish a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide details including when and where: _____						
The position(s) that I am applying for: _____						
My availability is as follows:						
<input type="checkbox"/> Monday <input type="checkbox"/> Friday <input type="checkbox"/> Day Shift <input type="checkbox"/> Full time						
<input type="checkbox"/> Tuesday <input type="checkbox"/> Saturday <input type="checkbox"/> Evening Shift <input type="checkbox"/> Part time						
<input type="checkbox"/> Wednesday <input type="checkbox"/> Sunday <input type="checkbox"/> Overnight Shift <input type="checkbox"/> Per diem						
<input type="checkbox"/> Thursday						
I am a U.S. Citizen or have the legal right to employment in the U.S. <input type="checkbox"/> Yes <input type="checkbox"/> No						
Proof of employment eligibility will be required at the time of hire.						
Have you ever received Child & Youth Protection Training? <input type="checkbox"/> Yes <input type="checkbox"/> No						
If yes, please identify when, where, and by whom: _____						
Please provide the date and provider of your last Criminal Background Check: _____						

Education & Training

	Name & Address of School	Graduated		Degree/Area of Study
High School		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
College		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Postgraduate School		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Other Education & Training		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Additional Education and Training Comments: _____				

Employment & Volunteer Activities

List all present and former employment and volunteer activities, beginning with your present or most recent position. Use additional pages if needed. **You may attach a resume or curriculum vitae, but this section must also be completed.**

<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Company/Organization Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Address</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;">TitleHourly Wage</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Supervisor</div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Phone</div> <div style="margin-bottom: 5px;">When (Month & Year) From _____ To _____</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Reason(s) for leaving</div>
Duties	
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Company/Organization Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Address</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;">TitleHourly Wage</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Supervisor</div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Phone</div> <div style="margin-bottom: 5px;">When (Month & Year) From _____ To _____</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Reason(s) for leaving</div>
Duties	
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Company/Organization Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Address</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;">TitleHourly Wage</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Supervisor</div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Phone</div> <div style="margin-bottom: 5px;">When (Month & Year) From _____ To _____</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Reason(s) for leaving</div>
Duties	
<div style="display: flex; justify-content: space-between;"><div>Have you served in the Armed Forces of the United States? Branch _____</div><div><input type="checkbox"/> Yes <input type="checkbox"/> No Period of Active Duty _____ to _____</div></div>	

References

Three references are required; include two professional references including your most recent supervisor. If you have resided in this area for less than two years, please provide at least one reference from your prior area of residence. **Indicate if we can contact each reference.**

Name _____	Phone _____	Title _____
Address _____	City _____	State Zip Code _____ _____
Do we have permission to contact this reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name _____	Phone _____	Title _____
Address _____	City _____	State Zip Code _____ _____
Do we have permission to contact this reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Applicant's Certification

I certify that **all** information in this application and all other information which I have provided in order to apply for and to secure work with Catholic Charities is true, complete, and correct.

I expressly authorize, without reservation, the agency, its representatives, employees and agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the agency, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this agency does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the agency and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the agency reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the agency is authorized to make any assurance to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the agency's director.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the agency's service, whenever it is discovered.

I promise to abide by the "Child and Youth Protection Policy" and other policies and procedures of Catholic Charities.

I acknowledge that I will be required to undergo a criminal background check and "Child and Youth Protection" training. I also acknowledge that I will be required to furnish proof of identity in association with the criminal background check and employment eligibility.

If applicable, per New York State Office of Mental Health and New York State Office for People with Development Disabilities, I understand that I will be required to submit to a Criminal History Records Check (fingerprint process) performed by the FBI as well as New York State Division of Criminal Justice Services; this check will be used to determine my eligibility for employment upon an ongoing review of my criminal history.

Do not sign until you have read the above applicant's certification.

I certify that I have read, fully understand, and accept all terms and conditions of the foregoing Applicant's Certification.

Applicant's Signature: _____ Date: _____

In addition to this application, please e-mail your resume and a cover letter to HR@ccocc.org for consideration.

This application for employment was received by Human Resources on (date) _____

Actions taken with regard to this Application:

☐ Not interviewed ☐ Interviewed ☐ Hired

Comments: _____

Signature _____

Date _____