

Society of the Transfiguration

Employment Application

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Society of the Transfiguration is an Equal Employment Opportunity Employer. Qualified applicants are considered for all positions without regard to race, color, religion, sex, pregnancy status, sexual orientation, gender identity, national origin, age, genetic information, veteran status, disability or handicap, hairstyle or any other legally protected status, locally or nationally. All qualified applicants will be given equal opportunity and selection decisions are based solely on job-related factors.

Society of the Transfiguration provides reasonable accommodations to disabled individuals to assist in the hiring process and to qualified individuals with disabilities in the performance of essential job functions, as required by federal, state, and local law. Any individual requiring accommodations/medication to complete this job application, or to participate in the application process, should call the Human Resources Manager for assistance.

Use the additional space on the back of this form, if needed to provide additional information as requested.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Transportation available? YES NO

Date Available: _____

Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this organization? YES NO If yes, when? _____
 What Position(s): _____

Have you ever been convicted of a felony? YES NO

If yes, explain:

Education

High School: _____ Location: _____

From: _____ To: _____ Did you graduate? YES NO

College: _____ Location: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Location: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list two professional references. References should not be related to the applicant.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Personal Reference: _____

Full Name: _____ Relationship: _____

How long known: _____ Phone: _____

Address: _____

Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Please explain any lapse of employment beyond 90 days:

Applicant's Agreement and Certification: Read Carefully and Sign on next page

- *I understand that in accepting this application, Society of the Transfiguration is in no way obligated to provide me with any employment and that I am not obligated to accept employment if offered.*
- *I certify that the facts contained in this application and any resume that I may submit in connection with seeking a job with The Society of Transfiguration are true and complete to the best of my knowledge. I understand that any misrepresentations or falsification of information or significant omissions on this application, resume, or during the pre-employment process will result in my applications being rejected, or, may be cause for subsequent dismissal if I am hired.*
- *I also understand that if I am subsequently offered employment, the offer is conditioned upon my successful completion of all post-conditional offer requirements such as background check, employment reference screening, job skills and aptitude testing, and educational reference screening. I understand that my refusal to provide written consent to any of the post-conditional offer requirements will result in the revocation of the offer. I understand that if I fail to successfully complete any post-conditional offer requirements, the offer of employment will be revoked.*
- *I further understand that any subsequent offer of employment is conditioned upon my ability to timely provide appropriate documents regarding my identity and legal right to work in the United States.*
- *If I become employed by Society of the Transfiguration, I understand my employment is at-will and can be terminated, with or without cause and with or without notice, at any time at the option of myself or of Society of the Transfiguration. I understand that, other than the Sister Superior of Society of Transfiguration or her designee, no one has the authority to enter into any individual agreement for employment for any specific period or to change my at-will status. Only the Sister Superior of Society of*

the Transfiguration or her designee has the authority to make any individual employment agreement and only in writing.

- *I have read and understand the contents of this employment application and am fully able and competent to complete it.*
- *I understand that this application will be kept on file for at least 90 days.*

By signing below, I acknowledge that I have read this Agreement, that I have been given a reasonable period to ask questions and seek advice regarding whether to sign this Agreement, and that I understand this Agreement.

Signature: _____ Date: _____