



Seton Home Study School

1350 Progress Drive Front Royal, Virginia 22630
(540) 636-9990 fax: (540) 636-1602 www.setonhome.org

"Under the Magisterium of the Catholic Church"

SETON HOME STUDY SCHOOL APPLICATION FOR EMPLOYMENT

Seton Home Study School is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status, except where a reasonable, bona fide occupational qualification exists.

**This application for employment is good for 30 days only.
Consideration for employment after 30 days may require a new application.**

PERSONAL:

Name _____ Date _____
Last First Middle

Address _____
Number & Street City State Zip Code

E-Mail Address _____

Position Sought _____ Full Time Part Time

Date Available _____ Salary Desired _____ Phone Number _____

Social Security Number _____ Are you over 18 years old? Yes No

Are you legally eligible for employment in the United States? Yes No

(If offered employment, you will be required to provide documentation to verify eligibility.)

EDUCATION: Please indicate education or training which you believe qualifies you for the position you are seeking.

High School: No. of Yrs Completed (*circle one*) 1 2 3 4 **Diploma:** Yes No **G.E.D.:** Yes No

School(s) _____ City/State _____

College and/or Vocational School: Number of Years Completed (*circle one*) 1 2 3 4

School(s) _____ City/State _____

Major _____ Degrees Earned _____

Other Training or Degrees:

School(s) _____ City/State _____

Course _____ Degree or Certificate Earned _____

PROFESSIONAL LICENSE OR MEMBERSHIP:

Type of License(s) Held _____ State of Virginia License Number _____

License Expiration Date _____ Other Professional Memberships _____

(You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other protected status.)

Personal Driving Record:

(This section is to be completed ONLY if the operation of a motor vehicle will be required in the course of the applicant's employment.)

How long have you been a licensed driver?: _____ Driver's License Number: _____

Expiration date: _____ Issuing State: _____

List any other state(s) in which you have had a driver's license(s) in the past: _____

Within the past five years have you had a vehicle accident? Yes No

Been convicted of reckless driving? Yes No If yes, give dates: _____

Been cited for moving violations? Yes No If yes, give dates: _____

Has your driver's license ever been revoked or suspended? Yes No If yes, explain: _____

Is your driver's license restricted? Yes No If yes, explain: _____

SKILLS:

Office: Data Entry _____ Excel or other spreadsheet Database

Typing speed _____ wpm.

Word Processing _____ WordPerfect MSWord Other _____

Other Software Skills _____

Has Seton Home Study School ever employed you? Yes No
If so, please state the name of the department, supervisor, and dates of employment: _____

RECORD OF CONVICTION:

During the last ten years, have you ever been convicted of a crime other than a minor traffic offense?
 Yes No

If yes, explain: _____

(A conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered).

EMPLOYMENT: List last employer first, including U.S. Military Service.

May we contact your present employer? Yes No
If any employment was under a different name, indicate name _____

Employer _____ **Address** _____

Telephone _____ Position _____

Dates of Employment: From _____ (Mo/Yr) To _____ (Mo/Yr)

Salary _____ Supervisor _____ Department _____

Duties _____ FT PT No. of Hrs. _____

Reason for Leaving _____

Employer _____ **Address** _____

Telephone _____ Position _____

Dates of Employment: From _____ (Mo/Yr) To _____ (Mo/Yr)

Salary _____ Supervisor _____ Department _____

Duties _____ FT PT No. of Hrs. _____

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Telephone _____ Position _____
Dates of Employment: From ____ (Mo/Yr) To ____ (Mo/Yr)
Salary _____ Supervisor _____ Department _____

Duties _____ FT ___ PT ___ No. of Hrs. _____

Reason for Leaving _____

If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.

Explain any gaps in work history: _____

Have you ever been discharged or asked to resign from a job? ___ Yes ___ No

If yes, explain: _____

REFERENCES:

Professional

Personal

Name _____

Name _____

Address _____

Address _____

Phone () _____

Phone () _____

Name _____

Name _____

Address _____

Address _____

Phone () _____

Phone () _____

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Seton Home Study School to verify their accuracy and to obtain reference information on my work performance. I hereby release Seton Home Study School from any/all liability of whatever kind and nature which, at any time, could result from obtaining and basing an employment decision on such information.

I understand that falsified statements of any kind or omissions of facts called for on this application may result in disqualification for consideration for employment or, if already employed, grounds for immediate dismissal.

I understand that should an employment offer be extended to me and accepted, I will fully adhere to the policies, rules and regulations of employment of the Seton Home Study School. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Seton Home Study School may terminate my employment at any time with or without notice or cause.

Signature of Applicant _____

Date: _____

Pursuant to federal regulations, we collect responses to the questions below for record keeping purposes. This information will NOT be kept with your application for employment. Federal law prohibits unlawful discrimination on the basis of race, color, sex, age, national origin, religion, or disability.

Check the block for the racial or ethnic group with which you identify:

- White (includes Arabian)
- Black (includes Jamaican, Bahamians and other Caribbeans of African but not Hispanic or Arabian descent)

- Hispanic (includes persons of Mexican, Puerto Rican, Central or South American or other Spanish origin or culture)
- Asian & Asian American (includes Pakistanis, Indians & Pacific Islanders)
- American Indians (includes Alaskans)

Check the block for the highest level of education you have completed (check only one):

- Less than 8th grade
- Completed 8th grade
- Attended high school
- High school graduate or equivalent

- Attended college and/or associate degree
- College graduate
- Attended graduate school
- Master's degree
- Graduate study beyond master's requirements
- Ph.D. or professional degree

Check the appropriate block:

- Female
- Male

Please indicate your date of birth: ___/___/___

Position applied for: _____

Position number: _____

FOR OFFICE USE ONLY

EEO Category: _____

How did you find out about this employment opportunity?

- Newspaper*
- Radio/TV*
- VEC
- State RECRUIT system
- Agency Bulletin Board
- Other (please specify)

*specify name of newspaper or other media
