

THE DIOCESE OF COLORADO SPRINGS

228 North Cascade Avenue Colorado Springs, Colorado 80903 (719) 636-2345

APPLICATION FOR EMPLOYMENT: TEACHER AIDE

In order that your application may be properly evaluated, it is essential that all of the following questions be answered carefully and completely. Applications will not be processed unless completed in full and accompanied by all of the requested documentation.

In addition to this application, please also submit the following:
1. Copy of High School Diploma or GED certificate.
2. 3 (or more) Letters of recommendation.

		PLEAS.	E PRINT		
Name	ST FIRST		MIDDIE INVENT	Date	
	sed a different name (ma				
Address	STREET		CVIIIV	STATE	gyp 00DP
	umber				
	nce				
Previously employ	yed by any Diocese?	NO YES	If yes, when?		
			E-mail address_		
When can you sta	art?	Hc	w were you referred t	o us?	
		POSITION	DESTRED		
Circle One:	FULL TIME	PART TIMI	E EITHER		
	E	DUCATIONAL	BACKGROUND		
What is your high	hest level of education?				
GED & Location_	hest level of education?		IIGH SCHOOL & Loca	ation	
GED & Location_	hest level of education?_	I-	IIGH SCHOOL & Loca	ation	
GED & Location_ COLLEGE/UNIVI Service	hest level of education?_	U. S. MILIT	IIGH SCHOOL & Loca RY RECORD Date	ationFin	al
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August 2019

REFERENCES

Give three or more references who have first-hand knowledge of your character and personality.

	Name and Position	Address	Telephone Number
<u></u>			
	EMPLO	YMENT EXPERIENCE	
List a	all of your current and previous positions (pat. Please complete this section and attach	paid and unpaid) in chronological o additional sheets as needed even i	order starting with the most f you submit a resume.
1.	Employed From	To	
	Company Name	Your Title	
	Address	Your Departmen	nt
	City & State	Supervisor's Pho	one Number
	Supervisor's Name and Title		
	Work Performed		
	Reason for Leaving		
	May we contact your present employer?	YES NO	

Employed From	_To
Company Name	_Your Title
Address	Your Department
City & State	_Supervisor's Phone Number
Supervisor's Name and Title	
Work Performed	
	AddressCity & StateSupervisor's Name and Title

Employed From	To
Company Name	
Address	Your Department
City & State	Supervisor's Phone Number
Supervisor's Name and Title	
Work Performed	

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the jobs you have held, which did you like the most and w	hy?
the jobs you have held, which did you like the least and w	hy?
APPLICANT'S DECLARATION, AUTHO	DRIZATION AND RELEASE
r answers on this application and on any resumé I provide are copy false or incomplete information in connection with my applications, will be cause for the rejection of my application or the ten Diocese of Colorado Springs and its agents to verify any infectionize and direct individuals, schools, employers, and law enformation concerning my background, and hereby release any and	omplete and true. I understand that the submission lication, whether on this or other documents or itermination of my employment at any time. I authorize the submission related to my application or resume. I also recement or government officials to freely provide and all of them from any liability for doing so.
Date	Print Name
	Signature
The Diocese of Colorado Springs shall comply with appropriate federal an employment on the grounds of race, color, national origin, protected age ca mental disability of any individual who	tegory, gender, marital status, military status or physical or
mental disability of any individual wife) is otherwise qualified.

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