

Application for EmploymentSisters of St. Joseph of Northwestern Pennsylvania is an Equal Opportunity Employer

Last name	Fir	rst name	Middle Initia	al				
Street Address	State	7IP T	elephone					
Are you a U.S. citizen	or otherwise authorize	ed to work in the U	J.S. on an unrestricted b	pasis? Verification and				
			business days after date					
Position applied for	I	How did you hear of	this opening?					
Availability:	^t Shift)	□Weekdays	□Full Time					
☐ Evening	gs (2 nd Shift)	□Weekends	□Part Time _	Hours/Week				
□Nights (3	3 rd Shift)		□Per Diem					
Vere you previously emplorated to the you been convicted to a xpunged, sealed, pardoned mployment. A conviction re applying may be taken f yes, please describe the conviction to the conviction of the yes, please describe the conviction to the yes.	of a felony in the last 7 yed or otherwise exonerate on which is substantially rainto consideration.	years? Note: This que ed or eradicated. A c related to the function Yes \(\text{No}\)	nestion does not apply to c conviction record will not ons or qualifications of the	convictions which have be necessarily be a bar to e positions(s) for which yo				
E ducation								
Name of School	Location	Year	Major	Degree				
High School								
College or University								
Post College	1			_				
Other Training								
Professional Registration or Licensure CPR Certified D Yes D No.	Туре	State Numb	ver Ro	egistration Date				
If you are a minor, can References (Not an I	•		ary to obtain employmen	nt? 🗆 Yes 🕒 No				
Name	Phone	Mailing Address	; <u>O</u>	Occupation				
Employment History	(Start with most	(Start with most recent employer)						
		Address		Phone				
			G IV	F 11 TT				
Position:	Starting Date	Leaving Date	Starting Wage	Ending Wage				
	•	•	Starting Wage					

Company Name	Address				Phone	
Position:	Starting Date	Leaving	Date	Starting Wage	Ending Wage	
☐ Full Time ☐ Part Time	May we contact?	☐ Yes ☐ No	Name of S	Supervisor		
Responsibilities						
Reason for leaving						
Company Name		Address			Phone	
Position:	Starting Date	Leaving	Date	Starting Wage	Ending Wage	
☐ Full Time ☐ Part Time	May we contact?	☐ Yes ☐ No	Name of S	Supervisor		
Responsibilities						
Reason for leaving						
					Phone	
Position:	Starting Date	Leaving	Date	Starting Wage	Ending Wage	
☐ Full Time ☐ Part Time	May we contact?	☐ Yes ☐ No	Name of S	Supervisor		
Responsibilities						
Reason for leaving						
Dlogge I	Pood Corofully	and Initial	Foob Do	ragraph Rafara	Signing	
I have disclosed all information	•			ragraph Before	8 8	
I understand, where permissible receiving a conditional offer accommodation.					examination after n with or without reasonable	
I understand that an offer of enbut not limited to, signing a Co				sters of St. Joseph of N	W PA requirements, including	
representatives to contact my prextent permitted by law, release	rior employers and al se same from any lia	l others for the p bility resulting f	ourpose of verrom the info	rification of the inform ormation released. I au	St. Joseph of NW PA and its ation I have supplied and, to the athorize employers, schools and any information or transcripts	
I understand employment with establish my identity and eligib			o contingent	on my providing suffic	ient documentation necessary to	
that, if employed, my employn cause, by either the Sisters of S no representation, whether ora constitute an implied or expre	nent is based upon m it. Joseph or myself wall or written, by any assed contract of empement for employme	nutual consent, he ithout prior notice representative coloyment. I furt not for any speci	as no specifice to the other of agent of her understa	c term and may be term er, unless otherwise pro- the Sisters of St. Jose and that no representation of time or make any cl	PA and I understand and agree minated at will, with or withou hibited by law. I understand tha ph of NWPA, at any time car we or agent of the SSJ has the nange in any policy, procedure Joseph Leadership.	
I certify that all of the above in in denial of employment or, if h					ission of information may resul ery.	
MY SIGNATURE IS EVIDE	NCE THAT I HAV	E READ AND A	GREE WI	TH THE ABOVE STA	TEMENTS.	
Signature				Date		
Sisters of St. Joseph of Northwo national origin, disability or any SSJ is committed to complying may provide for you during the	y other protected class with the Americans	s as defined by c	urrent federa	l, state or local legislati	on.	

Sisters of St. Joseph of Northwestern Pennsylvania 5031 West Ridge Road