



## Application for Employment

Thank you for your interest in employment with Saint Meinrad Archabbey. Please complete all sections of the application form so that your qualifications may be fully considered. It is the policy of Saint Meinrad Archabbey that equal employment opportunities be available to all persons without regard to race, color, sex, age, religion, national origin, disability, citizenship status, military status, or any other category protected under federal, state or local law, except where there is a bona fide occupational qualification.

Position Desired: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Cell Phone: ( ) \_\_\_\_\_ Other Message Phone: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

Date available to begin employment: \_\_\_\_\_ Salary desired: \_\_\_\_\_

If records are in another name(s), please list: \_\_\_\_\_

Have you previously worked at the Archabbey?

\_\_\_ Yes \_\_\_ No If yes please indicate position and year(s): \_\_\_\_\_

Are you 18 years of age or older? (Individuals who are 14 – 17 years of age may be required to provide a work permit.)

\_\_\_ Yes \_\_\_ No

Are you legally eligible to be employed in the United States? (Proof of identity and eligibility will be required upon employment.)

\_\_\_ Yes \_\_\_ No If no, please explain: \_\_\_\_\_

I am seeking (check all that are applicable):

- Full-time
- Part-time
- Seasonal (several months)
- On call

I am willing to work (check all that are applicable):

- Days (1<sup>st</sup> shift)
- Evenings (2<sup>nd</sup> shift)
- Nights (3<sup>rd</sup> shift)
- Split Shifts
- Rotating Shifts
- Weekends
- Overtime

How did you learn about this position? \_\_\_ Ad \_\_\_ Website \_\_\_ Individual If referred by an Archabbey co-worker,

please indicate that person's name: \_\_\_\_\_

## Education

School	Name, City, State	Circle Last Year Completed	Degree		Course of Study
			Yes	No	
High School		9 10 11 12			
Business / Vocational School		9 10 11 12			
College – Undergraduate		1 2 3 4			
Graduate School		1 2 3 4			
Other		1 2 3 4			
Internships / Field Placements					

## Professional Data (if applicable) Licensure, Certification, and/or Registration

Type	Registration / Certification / License Number	State(s)	Expiration Date

## Computer / Keyboarding Skills (if applicable)

Keyboarding WPM: \_\_\_\_\_

On a scale of 0 – 5, with 0 indicating no experience and 5 indicating highly proficient, rate your expertise with the following:

Microsoft:   \_\_\_ Word   \_\_\_ Excel   \_\_\_ PowerPoint   \_\_\_ Access   \_\_\_ Outlook

Please indicate any other software / computing skills you possess that would be applicable for the position for which you are applying: \_\_\_\_\_

## Skills and Qualifications

Summarize special skills and qualifications acquired from employment, membership in professional organizations or other experience that may qualify you to work at Saint Meinrad Archabbey. (Exclude those which indicate race, color, sex, religion, disability, age, national origin, or genetic information.)

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## Employment History

Beginning with your current / most recent employment, please complete the section below in full. Incomplete information could disqualify you from further consideration.

Company: \_\_\_\_\_ Job Title: \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_  
(mo / yr) (mo / yr)

Address: \_\_\_\_\_ City / State / Zip: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_ May we contact? \_\_\_ Yes \_\_\_ No

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Amount of notice given: \_\_\_\_\_

Company: \_\_\_\_\_ Job Title: \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_  
(mo / yr) (mo / yr)

Address: \_\_\_\_\_ City / State / Zip: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Amount of notice given: \_\_\_\_\_

Company: \_\_\_\_\_ Job Title: \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_  
(mo / yr) (mo / yr)

Address: \_\_\_\_\_ City / State / Zip: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Amount of notice given: \_\_\_\_\_

Company: \_\_\_\_\_ Job Title: \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_  
(mo / yr) (mo / yr)

Address: \_\_\_\_\_ City / State / Zip: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Amount of notice given: \_\_\_\_\_

Have you ever been discharged from a position or asked to resign from a position in lieu of being discharged? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain: \_\_\_\_\_

## Professional References

List individuals who can provide information about your employment, volunteer, or professional experiences. Please do not list supervisors who have already been identified on the previous page.

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Occupation / Relationship: \_\_\_\_\_ Number of Years Known: \_\_\_\_\_

Message Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Occupation / Relationship: \_\_\_\_\_ Number of Years Known: \_\_\_\_\_

Message Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Occupation / Relationship: \_\_\_\_\_ Number of Years Known: \_\_\_\_\_

Message Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Applicant Certification and Agreement

In exchange for the consideration of my job application by Saint Meinrad Archabbey, ("the Company"), I agree that:

\_\_\_\_\_(initials) Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of co-worker handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain a co-worker of the Company, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, WHICH MEANS THAT EITHER PARTY CAN END THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY OR NO REASON. I agree, if I am offered and accept a position, to conform to all existing and future Company rules and regulations, and I understand that Company reserves the right to change wages, hours and working conditions as deemed necessary.

\_\_\_\_\_(initials) I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others about me as deemed appropriate by the Company, and hereby release the Company from any liability as a result of such contract.

\_\_\_\_\_(initials) I understand that any employment offer is contingent upon my providing, within three working days of employment, valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986.

\_\_\_\_\_(initials) I have read and reviewed the information provided in this application and the above statements. I certify that the facts and information set forth in this application, are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts on the application, resume and any attachments (or on any required document) will be cause for denial of employment or termination of employment, regardless of when or how it was discovered.

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_