

For Personnel Use Only	
Date Received:	_____
Date Interviewed:	_____
Transcripts:	[]
Background:	[]

Episcopal Diocese of West Texas
 111 Torcido Drive, San Antonio, TX 78209
 Camp Capers/Mustang Island

A SMOKE FREE AND DRUG FREE WORKPLACE
EMPLOYMENT APPLICATION
Camp Nurse

The Dioces of WestTexas supports the principle that all persons are entitle to equal employment opportunity without regard to race, religion, color, marital status, national origin, sex, age, handicapping conditions or limited English proficiency. If you have a disability, which affects your ability to complete this application, let us know so that other arrangements can be made.

Name (last, first, middle)	Street Address (include city, state, zip)	Phone
_____	_____	_____

E-mail Address: _____

Have you ever been investigated for, charged with or pleaded guilty or "no contest" to any crime involving the sexual abuse of any person or indecency with a minor? **Yes ? No ?**
 If yes, explain the circumstances on a separate sheet and attach it to this application.

Have you ever been charged with a crime listed in the previous question where the court has deferred further proceedings without entering a finding of guilt and placed you on probation or in a public service or education program? **Yes ? No ?**
 If yes, explain the circumstances on a separate sheet and attach it to this application.

Have you ever been convicted of a crime other than a minor traffic offense or has any court ever deferred further proceedings without entering a finding of guilt and placed you on probation or in a public service or education program for any such crime? **Yes ? No ?**
 If yes, explain the circumstances on a separate sheet and attach it to this application.

Personal References:

1. _____	3. _____
2. _____	4. _____

EDUCATION ~ List education (High School through College). Please begin with most recent degree.

Name of Institution	Location	Dates Attended	Total Years	Year Grad.	Degree

WORK EXPERIENCE ~ List all the places you have worked. Please begin with most recent first.

Employing Agency / Hospital and Address	Number of Years	Date Began MM/DD/YYYY	Date Concluded MM/DD/YYYY	Assignment / Position	Reason for Leaving

LICENSE & CERTIFICATION DATA ~ List all current licenses and certifications.

Type of License / Certification	State / Agency	Number	Issue Date	Expiration Date

REFERENCES ~ List individuals not related to you who can speak with authority regarding your education and work experience.

Name Address Telephone No. Occupation

1. _____
2. _____
3. _____

When could you begin work? _____

ACKNOWLEDGEMENT OF TERMS OF APPLICATION

In making this application for employment, I authorize the Diocese of West Texas to check employment and personal references, and to seek the release of investigatory information, including a "Limited Criminal History," possessed by any private or public employer or any local, state, or federal agency. I authorize individuals, private or public employers, or local, state, or federal agencies to provide the school district any information they may release concerning the matters described herein, and I will cooperate to the extent necessary to obtain the release of this information. I understand that this investigative report of my employment history and background may be made whereby information is obtained through personal interviews and/or reference forms with third parties, law enforcement agencies, prior employers, co-workers or others. This inquiry may include information as to my character, general reputation, personal characteristics, work habits and mode of living, whichever may be applicable.

I hereby acknowledge that, at the time of my post-offer pre-employment physical examination or for reasonable suspicion subsequent to employment, blood and/or urine samples may be taken and tested for evidence of consumption by me of illegal drugs, and/or alcohol. I consent to such testing, and hereby release, discharge and waive any and all claims I now or may in the future have against the Diocese of West Texas and/or medical personnel related to such tests or the results thereof.

I affirm that I have never been convicted, or charged with and had the charges plea-bargained to a lesser offense, of any of the following offenses involving children as defined by Texas Code: rape, criminal deviate conduct, child molesting, child exploitation, vicarious sexual gratification, child solicitation, incest, child selling, child seduction, or sexual battery.

I further understand that if an offer of employment is made, I will be required to submit documentation which will verify that I am a citizen or a national of the United States, an alien lawfully admitted for permanent residence, or an alien authorized to be employed in the United States.

I expressly waive in connection with any request for, or provision of such information, any claims or causes of action, including without limitation, defamation, infliction of emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the school district, its officials, employees, trustees, or agents, or against any provider of information related to this application or this application process.

I hereby affirm that the statements made in this application are true to the best of my knowledge and belief. I understand that future employment may be terminated if I have misrepresented information submitted.

I have read this authorization and release of all claims, and I expressly agree to the terms set out herein.

_____ Date _____ Signature _____

To be completed after employment offered ~

Do you have any physical or mental limitations, which may affect your ability to perform your position duties? **Yes ? No ?**

If yes, describe limitations and indicate accommodations necessary for you to perform essential functions of your position.

_____ Marital Status: Married _____ Single _____ Sex: Male _____ Female _____

Birthdate _____ Social Security No. _____

Location: _____ Position: _____ Starting Date: _____

No. of Hours / Week: _____