

**EAppsDB:**

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## Archdiocese of Chicago Application for Volunteers

### Main Application

Enter your full legal name, as it would appear on your driver's license.

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

First

Middle

Last (alphabetizing)

Second Last Name (if applicable): \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

City

State

Zip

Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Home Phone: \_\_\_\_\_

Area Code

Number

Work Phone: \_\_\_\_\_

Area Code

Number

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

### Archdiocese of Chicago Questionnaire

1. Specify Parish/School/Agency to which you are applying or at which you currently hold a position:

\_\_\_\_\_

2. Start Date: \_\_\_\_\_

Note: You will be given a chance to enter additional sites on a different page.

3. What position are you applying for or what position do you currently hold?

\_\_\_\_\_

4. What interested you in this position?

\_\_\_\_\_

\_\_\_\_\_

5. What has prepared you for this position)?

\_\_\_\_\_  
\_\_\_\_\_

5. In your work as an employee or volunteer for the Archdiocese of Chicago, do you have regular contact with children? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Residential History**

\_\_\_\_\_ **Check here if you have lived in your current residence for longer than 7 years.**

If you have lived in your current residence you do not have to complete the residential history. You only need to check the box.

Dates:

Beginning Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Ending Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Street Address City State Zip

Beginning Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Ending Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Street Address City State Zip

Beginning Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Ending Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Street Address City State Zip

**Confidential Background Check Information**

Please note: Information in this section is only used to obtain criminal records, which are reviewed by a diocesan official in strictest confidence.

\_\_\_\_\_ Yes \_\_\_\_\_ No Have you ever had a founded case against you for child abuse or neglect?

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

\_\_\_\_\_ Yes \_\_\_\_\_ No Have you ever been convicted of a crime? (Felony or misdemeanor, except minor traffic violations?)

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

\_\_\_\_\_ Yes \_\_\_\_\_ No Have you changed your last name in the past 7 years?

If yes, what was your previous last name? \_\_\_\_\_

Driver's License: State \_\_\_\_\_ Number \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

**Declarations**

\_\_\_\_\_ I declare that all statements contained in this application are true and agree that any misrepresentation or omission is cause for rejection of my application or dismissal from my position.

\_\_\_\_\_ I hereby authorize the **Archdiocese of Chicago** to conduct a personal and professional background check for the purposes of my application at the **Archdiocese of Chicago**. The **Archdiocese of Chicago** may contact any references, past and current employers, church, youth organizations, agencies where volunteer service has been completed, and any individual or organization which might be relevant to my desired position.

\_\_\_\_\_ I also hereby give complete permission for the **Archdiocese of Chicago** to conduct a criminal background check, abuse registry check, and driving record check for the purposes of my employment. I further authorize the **Archdiocese of Chicago** to conduct such checks periodically throughout my employment or volunteer service.

\_\_\_\_\_ I understand and agree that information may be obtained from sources that I provided above and that this information will be held confidentially by the **Archdiocese of Chicago** and not revealed to me except as required by law. I have also read and understood the above stated information within this release and am signing below of my own free will.

\_\_\_\_\_ I understand that a criminal background check will be conducted prior to and during my service.

\_\_\_\_\_ I agree to observe all of the **Archdiocese of Chicago** guidelines and policies applicable to my employment or volunteer service.

\_\_\_\_\_ I understand that the **Archdiocese of Chicago** has a **ZERO TOLERANCE FOR ABUSE** and takes all allegations of abuse seriously. I further understand that the **Archdiocese of Chicago** cooperates fully with the authorities to investigate all cases of alleged abuse. Abuse of minors or vulnerable adults is grounds for immediate dismissal and possible criminal charges.

\_\_\_\_\_ I understand that I can withdraw from the application process at any time.

\_\_\_\_\_ I understand and agree that false statements and/or omissions regarding past conduct and/or present situations may be grounds for denial of the application to provide employment and/or volunteer services.

\_\_\_\_\_ I authorize the **Archdiocese of Chicago** to share this information with all parishes/schools/agencies at which I work or volunteer.

\_\_\_\_\_ My signature indicates that I have read and understand the above.

**Do not sign until you have read and initialed the above statements.**

**Applicant Signature** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

For Administrator Use Only

\_\_\_\_\_ I testify that the original signed declaration form is on file.

Form Entered By: \_\_\_\_\_

First Name

Last Name

**Selected Sites**

Please indicate the city and the name of the parishes/schools with which you would like this application to be registered.

If additional space is needed, please use reverse side.

City Where Parish Is Located

Name of Parish or School

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_