

**APPLICATION FOR EMPLOYMENT**  
**DEPARTMENT OF EDUCATION AND CATECHESIS**  
**DIOCESE OF LANSING**  
**300 WEST OTTAWA STREET**  
**LANSING, MICHIGAN 48933**  
**PH: 517/342-2481**  
**FAX: 517/342-2515**

PLEASE TYPE OR PRINT IN BLACK INK

Name \_\_\_\_\_  
last first middle initial

Bus. Phone \_\_\_\_\_

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

Address \_\_\_\_\_  
number and street city state zip code

If vowed, community and date of profession \_\_\_\_\_  
 If ordained, diocese and date of ordination \_\_\_\_\_

If a former religious, date of final dispensation \_\_\_\_\_  
 If a former deacon/priest, date of laicization \_\_\_\_\_

**Education**

*(please have college transcripts sent for all credits received)*

NAME OF INSTITUTION	DATES ATTENDED	NUMBER OF CREDITS TAKEN	DEGREE RECEIVED	G.P.A.

SEMINARS AND/OR WORKSHOPS ATTENDED	MAIN OBJECTIVE	DATES

**Publications and Educational Contributions**

*(Please list any articles or books published or significant workshops, seminars or classes you facilitated)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Work Experience**

*(please begin with your most recent employment)*

DATES OF  
EMPLOYMENT

POSITION  
HELD

LOCATION  
*(i.e. parish, city and state)*

1) \_\_\_\_\_

MAIN RESPONSIBILITIES  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REASON FOR LEAVING  
\_\_\_\_\_  
\_\_\_\_\_

2) \_\_\_\_\_

MAIN RESPONSIBILITIES  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REASON FOR LEAVING  
\_\_\_\_\_  
\_\_\_\_\_

3) \_\_\_\_\_

MAIN RESPONSIBILITIES  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REASON FOR LEAVING  
\_\_\_\_\_  
\_\_\_\_\_

**References**

*(Please send one of the enclosed recommendation forms to each of the four persons you list)*

PROFESSIONAL

NAME

OCCUPATION

CAPACITY IN WHICH THEY KNOW YOU

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



8. Why do you wish to enter professional ministry in the Diocese of Lansing?

9. When will you be able to begin employment?

*To the best of my knowledge the information I have provided on this form is complete and accurate. I understand that any misrepresentation of facts in this application will be considered just cause for dismissal at the discretion of the employer.*

*Further, I hereby grant the Diocese of Lansing permission to investigate any of the facts or statements submitted regarding me, except where my written statement on this form specifically requests that no investigation be made.*

*I (  ) do (  ) do not waive my right to inspect the reference information received in conjunction with this application as stated in the Family Educational Rights and Privacy Act of 1974, Public Law 93-380.*

APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

Return the completed form to:

St. Mary Parish  
Attn: Pastor  
10601 Dexter Pinckney Road  
Pinckney, MI 48169

Your answers to questions on this form are regarded as confidential, to be used only in the employment process. Your application will be acted upon as soon as we receive this form and supporting materials. Application materials will be held for one year from the date of application (*unless otherwise requested by you*). After that time, your file will be destroyed.

The Diocese of Lansing does not discriminate on the basis of sex, race, national origin, age or handicap in its employment policies.