



*Bishop Baraga Association*

347 Rock Street, Suite 2  
Marquette, MI 49855-4725  
ph: 906.227.9117  
www.fredericbaraga.org

**Bishop Baraga Association**

Application for Employment

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

Present Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Phone No. \_\_\_\_\_ Email: \_\_\_\_\_

If related to anyone in our employ (BBA or Diocese of Marquette), please give name & department:  
\_\_\_\_\_

Referred by: \_\_\_\_\_

**EMPLOYMENT DESIRED:**

Position: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Date available: \_\_\_\_\_

What experience have you had in this type of work?

Are you presently employed? \_\_\_\_\_ May we inquire of your present employer? \_\_\_\_\_

Person to contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_

Are there any criminal charges pending against you? \_\_\_\_\_

**IN CASE OF EMERGENCY NOTIFY:**

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

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

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

**EDUCATION:**

Name and Location

Years Attended

Elementary School: \_\_\_\_\_

High School: \_\_\_\_\_

College: \_\_\_\_\_

Trade, Business or Correspondence School: \_\_\_\_\_

**FORMER EMPLOYERS:** (List below your last two employers)

Name & Address	Salary	Position	Reason for Leaving
_____			
_____			

Length of employment: (Month/Year) from: \_\_\_\_\_ to: \_\_\_\_\_

Length of employment: (Month/Year) from: \_\_\_\_\_ to: \_\_\_\_\_

**REFERENCES:** (Give the names of two people, not relatives, who have known you at least one year.)

Name and Address:	Business/Occupation:	Phone:
1. _____	_____	_____
2. _____	_____	_____

I agree to conform to the rules and regulations of employer, and I understand that my employment and compensation can be terminated, with or without cause and with or without notice at any time, at the option of either employer or me. Should my employment require a written and signed employment contract, I understand that just cause is not a necessary basis for non-renewal of a contract of employment, since employer and employee have a right to decline renewal of a contract of employment for any reason or no reason. I understand that no agent or employee of employer has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to this.

Dated \_\_\_\_\_ Signature: \_\_\_\_\_

Please return completed application to:

Bishop Baraga Association  
Attn: Executive Director  
347 Rock Street  
Marquette, MI 49855  
lmckeen@bishopbaraga.org