



**Center for Benedictine Life at the
Monastery of St. Gertrude**

**Idaho Corporation of Benedictine Sisters
465 Keuterville Road
Cottonwood, ID 83522**

Last Name, First Name, Middle Name/Initial	Home Phone
Post Office Address	Business Phone
Street Address	Message Phone
City, State, Zip Code	E-Mail Address

Position Desired	Pay Expected
When will you be available to begin work?	
How did you learn of our organization?	

Are you legally eligible for employment in the United States?	Yes	No
Will you work overtime if asked?	Yes	No
Apart from absence for religious observance, are you available for full-time work?	Yes	No
Can you perform all of the job functions, with or without reasonable accommodations?	Without	With

Describe or demonstrate how you would perform the job.

In case of emergency, please notify:

Name and Address	Phone Number(s)	Relationship

Name and Address	Phone Number(s)	Relationship

PREVIOUS EMPLOYMENT

Company Name and Address	Supervisor	
Job Title and Description of Work	Telephone	
	E-Mail	
Employed from (MM/YY) to (MM/YY)	Pay	
Reason for Leaving	Start	End

Company Name and Address	Supervisor	
Job Title and Description of Work	Telephone	
	E-Mail	
Employed from (MM/YY) to (MM/YY)	Pay	
Reason for Leaving	Start	End

Company Name and Address	Supervisor	
Job Title and Description of Work	Telephone	
	E-Mail	
Employed from (MM/YY) to (MM/YY)	Pay	
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Job Title and Description of Work	Telephone	
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Reason for Leaving	Start	End

Company Name and Address	Supervisor	
Job Title and Description of Work	Telephone	
	E-Mail	
Employed from (MM/YY) to (MM/YY)	Pay	
Reason for Leaving	Start	End

EDUCATION

Name and Location of High School		Did you Graduate?	
	Course of Study	Yes	No

Name and Location of College, University, or Trade School		Did you Graduate?	
	Course of Study	Yes	No

Other Education		Did you Graduate?	
	Course of Study	Yes	No

REFERENCES

Please indicate if this is a personal or professional reference/relationship, i.e., friend, co-worker, former supervisor, etc.

Name and Address	Phone Number (s) E-Mail Address (s)	Relationship

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I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of the Monastery.

Signature _____

Date _____