

EMPLOYMENT RECORD FORM

Name _____ SSN ____/____/____

Date of Birth _____

Most recent Date of Diocesan Hire _____

Previously employed by the Diocese? NO YES

If YES, please provide the information requested below regarding your previous years of employment with the Diocese (beginning with your present employment). This information is necessary to verify and credit you with the appropriate number of years of employment with a parish, school, agency or institution which participates in this plan.

Employment Date (month/year): From _____ To _____

Parish/School _____

Location _____

Position _____

Employment Date (month/year): From _____ To _____

Parish/School _____

Location _____

Position _____

Employment Date (month/year): From _____ To _____

Parish/School _____

Location _____

Position _____

Employment Date (month/year): From _____ To _____

Parish/School _____

Location _____

Position _____

→ **Employee Signature** _____ **Date** _____