

Photo  
(Optional)

\_\_\_\_\_  
(SCHOOL NAME)  
**TEACHER EMPLOYMENT APPLICATION**

Revised 06/2015

*In compliance with federal and state equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, sex, national origin, age, marital status, or the presence of a non job-related medical condition or handicap. There may occasionally be positions vacant, which require knowledge of the Catholic faith. In those circumstances, knowledge of the faith becomes a qualification, but it is not always necessary that the applicant be Catholic.*

**PERSONAL INFORMATION**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
Street City State Zip How Long?

**TELEPHONE** ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home Cell Email

**PLACE:** \_\_\_\_\_ **SOCIAL SECURITY #** \_\_\_\_\_ **U.S. CITIZEN?**  YES  NO

**RELIGION** \_\_\_\_\_ **CHURCH PARISH** \_\_\_\_\_

**OPTIONAL INFORMATION**

**CONDITION OF HEALTH** Any Physical Disabilities?  YES  NO

If yes, please explain:

**Any Limitations to Work?**

**STATUS**  Single  Married  Separated  Divorced  Widowed **RELIGIOUS:**  Sister  Brother  Deacon  Priest **ORDER**

**SPOUSE=S NAME** Place of Employment Occupation

**Any Children?**  Yes  No How Many? Age of Child(ren)

**REQUIRED INFORMATION**

Do you have a valid driver=s license?  YES  NO Do you have transportation at your disposal?  YES  NO

Has your driver=s license ever been suspended or revoked?  YES  NO

Do you use illegal Drugs?  YES  NO

Have you ever been accused of, or has a civil or criminal complaint ever been filed against you, alleging sexual abuse, or neglect of a minor?  YES  NO

Have you ever been convicted of a felony?  YES  NO

If yes, please give details:

### EDUCATIONAL BACKGROUND

NAME OF SCHOOL / UNIVERSITY CITY, STATE & ZIP CODE	DATES ATTENDED	MAJOR	MINOR	DEGREE or NUMBER OF HOURS	DATE RECEIVED

Total Educational Hours

Other Qualified Teaching Fields & Number of Credits

### CERTIFICATE(S)

STATE	DATE		TYPE	CERTIFICATE NUMBER	AREAS OF CERTIFICATION AS LISTED ON CERTIFICATE
	ISSUED	EXPIRED			

Professional Organizations Membership

Hobbies, Other Interests and Skills

### STUDENT TEACHING

LOCATION & COMPLETE MAILING ADDRESS <small>(Include Zip Code)</small>	DATE	GRADE LEVEL	NAME OF SUPERVISOR

### TEACHING EXPERIENCE

SUBJECT	GRADE	SCHOOL	COMPLETE MAILING ADDRESS <small>(Include Zip Code)</small>	DATE(S)	ANNUAL SALARY

**ADMINISTRATIVE EXPERIENCE**

<b>POSITION</b>	<b>SCHOOL / BUSINESS</b>	<b>COMPLETE MAILING ADDRESS</b> <small>(Include Zip Code)</small>	<b>DATE(S)</b>	<b>ANNUAL SALARY</b>

**OTHER WORK EXPERIENCE**


**REFERENCES**(Two character references and three professional references required)

<b>TYPE</b>	<b>NAME</b>	<b>COMPLETE MAILING ADDRESS</b> <small>(Include Zip Code)</small>	<b>TELEPHONE NUMBER</b>	<b>YEARS KNOWN</b>
Character (No Relatives)				
Character (No Relatives)				
<u>Education or Business</u>				
<u>Education or Business</u>				
<u>Education or Business</u>				

**ANSWER THE FOLLOWING QUESTIONS BY MARKING A YES OR A NO.**

**ALL A YES ANSWERS MUST BE EXPLAINED FOR THIS APPLICATION TO BE CONSIDERED.**

1. Have you for any reason been suspended, dismissed or asked to resign a teaching position?  YES  NO

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2. Have you ever had a teaching certificate denied, dismissed, revoked or suspended?  YES  NO

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3. Have you ever refused or failed to fulfill an employment contract at any school?  YES  NO

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4. Have you ever been discharged from the military for any reasons other than honorable?  YES  NO

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5. Have you ever been found guilty for immoral conduct?  YES  NO

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**ANSWER ALL OF THE FOLLOWING QUESTIONS. USE A SEPARATE SHEET IF NECESSARY.**

1. Why do you want to work in a Catholic School?

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2. Please describe any additional training, qualities or experiences that you have had that would be an asset in the position for which you are applying.

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