

ARCHDIOCESE OF LOUISVILLE
EMPLOYMENT APPLICATION
FOR
TEACHERS, PRINCIPALS, COUNSELORS
AND SUBSTITUTE TEACHERS



TO BE CONSIDERED FOR EMPLOYMENT IN A CATHOLIC SCHOOL IN THE ARCHDIOCESE OF LOUISVILLE, YOU MUST COMPLETE THIS APPLICATION FORM AND MAIL IT, ALONG WITH OTHER REQUESTED DOCUMENTS TO:

Pastoral Center
Office of Catholic Schools
Attn: Assistant Superintendent of Schools
3940 Poplar Level Road
Louisville, KY 40213

For questions regarding your application, please call (502) 585-3291.

EQUAL OPPORTUNITY EMPLOYER
Catholic Schools do not discriminate against any employee in an unlawful manner.





Application Checklist:

- A. For a completed full time teaching application, please submit the following documents:
- A completed employment application (pages 3-6 of this packet)
 - A resume
 - A copy of a valid Kentucky Teaching Certificate or SOE/Confirmation of Employment Form
 - Official college transcripts
 - Three student teaching evaluations or three final appraisals from a prior teaching position
 - Employment/Volunteer Inquiry Release Form (page 7 of this packet)
 - SRI Supplement (pages 8-10 of this packet)
- B. For a completed substitute teaching application, please submit the following documents:
- A completed employment application (pages 3-6 of this packet)
 - A resume
 - A copy of a valid Kentucky Teaching Certificate or Substitute Teaching Certificate, if applicable
 - Official college transcripts (must have at least 60 hours of college credit)
 - Two letters of reference- It is preferred that reference letters come from a supervisor or professor and on official letterhead and signed. Other sources may include a pastor, volunteer coordinator, or someone who can speak to the applicant's experience teaching and/or working with children.
 - Employment/Volunteer Inquiry Release Form (page 7 of this application packet)
 - Safe Environment Training proof of attendance – session schedule available on website at www.archlou.org under “Restoring Trust”

Please mail all application documents to:

Pastoral Center
Office of Catholic Schools
Attn: Assistant Superintendent of Schools
3940 Poplar Level Road
Louisville, KY 40213

For questions regarding the application process, please call (502) 585-3291 or email lweiter@archlou.org.

Archdiocese of Louisville

OCS Employment Application



For Office Use Only:

Date Received: _____ Date Available: _____
N-C FT PT Sub Prin/Coun
KY Cert _____ for Grades/Subject _____
SET: _____ MM/YYYY Added
CRC: _____ to Sub List: _____
Sent Confirm Letter: _____
Meeting Date: _____

A. Applicant Information

Name _____
(Last) (First) (Middle) (Maiden)

Address _____
(Street) (City) (State) (Zip)

Email Address: _____ Phone Number: _____

(Highest Degree) (College/University) (Year Graduated) (Major) (Minor)

(Next Degree) (College/University) (Year Graduated) (Major) (Minor)

(Third Degree) (College/University) (Year Graduated) (Major) (Minor)

(High School Attended) (City) (State) (Year Graduated)

(Elementary School Attended) (City) (State) (Year Graduated)

B. Certification Information: Indicate whether you have any of the following:

_____ Valid teaching certificate from the state of Kentucky Expires: _____

_____ Valid teaching certificate from another state Expires: _____

_____ Valid Statement of Eligibility/COE from the state of Kentucky Expires: _____

_____ Two years of out-of-state teaching experience Expires: _____

Area of certification: _____

If you are a beginning teacher, have you taken the Praxis? Yes No

If so, when: _____ OR Registered to take the Praxis exam on: _____

Are you a member of the Catholic faith? Yes No

(Membership in the Catholic faith is not a prerequisite for employment. However, the Archdiocese reserves the right to give preference in hiring to Catholics, particularly for those positions requiring the teaching of religion.)

C. Educational Service

List most recent experience first. Include student/substitute teaching experience if you have less than three years teaching experience. Use a separate sheet if necessary.

DATES FROM - TO	POSITION	GRADE(S) OR SUBJECTS TAUGHT	SCHOOL SYSTEM/ SCHOOL NAME	REASON FOR LEAVING

D. Professional References

List only those people who are qualified to evaluate your skills for the position sought.

NAME	POSITION	ORGANIZATION NAME	ADDRESS	PHONE

Availability Date: _____ Position applied for: Full-Time Part-Time Substitute

Schools are located in the following seven counties- please select all in which you would be interested in teaching: Hardin Jefferson Marion Nelson
 Oldham Shelby Washington

Are you currently under contract? Yes No

If yes, name of school or system: _____

Complete additional information below only if you are applying for a substitute teacher position.

Grade Level (s): _____ Subject (s): _____

Experience working with children: Yes No

Are you available for long-term sub positions: Yes No

Are you certified by the Kentucky Department of Education as a substitute teacher? Yes No
(If yes, please include a copy of the certificate.)

Please include information such as area you will travel, days of the week available, and best time to contact you.

EMPLOYMENT INFORMATION RELEASE AUTHORIZATION

I, _____, hereby affix my signature and release from liability any person authorized to give or receive any information related to my job performance/employment history, including all data and information pertaining to this application for employment, related papers, or oral interview.

I, therefore, hereby grant authorization to the Office of Catholic Schools, and the administrators of the Catholic schools, to any time prior to or during my employment:

- 1. Request any and all materials and information pertaining to my employment from any of my present or former employers, supervisors, or co-workers.
- 2. Request verification of credentials from all educational institutions I have attended.
- 3. Request any and all materials and information pertaining to any convictions for offenses against the law, including motor vehicle records, if applicable to the duties of a job for which I am being considered.
- 4. Request from any and all references I have listed any and all information pertaining to my job performance/employment history as these are related to my ability to perform the duties of a job for which I am being considered.

I hereby further authorize:

- 1. My present and any former employers to release any and all information (written or verbal) pertaining to my employment with those employers to the Office of Catholic Schools in care of the Assistant Superintendent of Schools.
- 2. Any and all educational institutions I have attended to release my credentials, upon request, to the Office of Catholic Schools.
- 3. Local and state police and state motor vehicle departments to research their records and to release any and all information pertaining to convictions and charges pending against me.
- 4. Any and all persons listed by me as references to release any and all information pertaining to my job performance/ employment history as these relate to my ability to perform the duties of a job for which I am being considered. I further understand that I will not be permitted to view any such references.

I hereby certify that all information contained in this application for employment is true and accurate. I understand that submitting false information may result in the dismissal of my application or termination if hired.

Signature of Applicant

Date

Have you ever been convicted of a crime? Yes No
(Conviction of a crime is not an automatic bar to employment.
Please give details. Each case will be evaluated.)

STATE LAW REQUIRES A CRIMINAL RECORD
CHECK AS A CONDITION OF EMPLOYMENT.
(see Employment/Volunteer Inquiry Release Form)

EMPLOYMENT / VOLUNTEER INQUIRY RELEASE FORM

In conjunction with my application for employment/volunteering with you, I understand that you intend to use Selection.com to obtain Consumer Reports (hereinafter called "Reports") about me as defined in the Fair Credit Reporting Act (FCRA). These "Reports" do NOT include my Credit Report but may include information concerning motor vehicle record, civil litigation history and/or criminal record.

I understand that you may rely on any or all of the above referenced information in determining whether to extend an offer of employment/acceptance to me. If you contemplate making an adverse decision that will affect me based, in whole or in part, upon a "Report" obtained from Selection.com, I will be provided with a copy of the "Report" and a written summary of my Consumer Rights under the FCRA before you finalize that decision.

I have read the above disclosure and I hereby authorize you, Selection.com or its authorized agents to obtain the above referenced information about me. I also authorize all agencies, bureaus, employers, information service organizations and individuals to provide any of the above referenced knowledge or information they have concerning me. If I am hired/accepted, this authorization shall remain on file and shall serve as an ongoing authorization for you to obtain "Reports" about me from Selection.com at any time during my employment/appointment with you. A photocopy or facsimile of this authorization shall be as valid as the original.

Signature _____ Date _____

THE FOLLOWING INFORMATION IS REQUIRED TO CONDUCT THE BACKGROUND INVESTIGATION

PRINT NAME _____
Last Name First Name Middle Initial Social Security Number

PREVIOUS OR MAIDEN NAME _____ PHONE NUMBER _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

DRIVER'S LICENSE NUMBER _____ STATE ISSUED _____

EMAIL ADDRESS _____

List states and counties of residence, other than above, for the past seven (7) years:

COUNTY _____ STATE _____; COUNTY _____ STATE _____; COUNTY _____ STATE _____

FOR IDENTIFICATION PURPOSES ONLY: Date of Birth _____

My prospective employer understands age to be a protected characteristic, and the information requested will not be used as the basis for any employment decision.

By checking this box, I request to receive a free copy of any Report ordered on me, sent to my email address above.

This form provided by: Selection.com



Complete SRI portion only if you are applying for a teaching position.

**SRI ACADEMIES
TEACHER APPLICATION
SUPPLEMENT**

Last Name *First* *Middle*

DIRECTIONS: Please answer each of the questions below as best you can. If more space is needed please attach additional pages.

1. What do you want to accomplish as a teacher?

2. How will (do) you go about finding out about students' attitudes and feelings about your class?

3. An experienced teacher offers you the following advice: "When you are teaching be sure to command the respect of your students immediately and all will go well." How do you feel about this?

4. How do you go about deciding what it is that should be taught in your class?

5. A parent comes to you and complains that what you are teaching his/her child is irrelevant to the child's needs. How would you respond?

6. What do you think will (or currently does) provide you the greatest pleasure in teaching?

7. When you have some free time, what do you enjoy doing the most?

8. How do you go about finding what students are good at?

9. Would you rather try a lot of "way out" teaching strategies or would you rather try to perfect the approaches which work best for you? Explain your position.

10. Do you like to teach with an overall plan in mind for the year, or would you rather just teach some interesting things and let the process determine the results? Explain your position.

11. A student is doing poorly in your class. You talk to him/her, and he/she tells you that he/she considers you to be the poorest teacher he/she has **ever** met. What do you do?

12. If there were absolutely no restrictions placed upon you, what would you most want to do in life?
