



**EDUCATION**

- High School \_\_\_\_\_ City/State \_\_\_\_\_
- College/University \_\_\_\_\_ City/State \_\_\_\_\_  
 Major \_\_\_\_\_ Minor \_\_\_\_\_ Degree \_\_\_\_\_
- College/University \_\_\_\_\_ City/State \_\_\_\_\_  
 Major \_\_\_\_\_ Minor \_\_\_\_\_ Degree \_\_\_\_\_
- College/University \_\_\_\_\_ City/State \_\_\_\_\_  
 Major \_\_\_\_\_ Minor \_\_\_\_\_ Degree \_\_\_\_\_
- Student Teaching  
 School \_\_\_\_\_ City/State \_\_\_\_\_  
 Grades/Subjects \_\_\_\_\_ Supervisor \_\_\_\_\_

**INDIANA TEACHING CERTIFICATION A current copy of your teaching license must be submitted for our files.**

- Type:     Professional     Provisional     Standard     Reciprocal
  - Preparation Level:   Elementary   Secondary
  - Grade Validity:     K-6     K-12     1-6     5-12     7-8     7-12     9-12
  - Indiana License (Reference) Number \_\_\_\_\_ Rules: \_\_\_\_\_
  - Subject Areas Listed \_\_\_\_\_
  - Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_
  - Out-of-State License:  
                           Issued from \_\_\_\_\_ Expiration Date \_\_\_\_\_
- Have you applied for an Indiana Teaching License?   \_\_\_\_\_ Yes   \_\_\_\_\_ No\*

*\*Complete enclosed Certification Information and contact: Indiana Department of Education, Division of Professional Standards, Room 229-State House, Indianapolis, IN 46204. (317) 232-9010.*

**EXTRA-CURRICULAR ACTIVITY QUALIFICATIONS**

Please list extra-curricular activities you are qualified to supervise.

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**EMPLOYMENT HISTORY**

*Beginning with the most recent employment, please list all previous **teaching experience**.*

▶ Employer \_\_\_\_\_ Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
Employment Dates: From \_\_\_\_\_ to \_\_\_\_\_ Telephone ( \_\_\_\_\_ )  
Position/Duties \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

▶ Employer \_\_\_\_\_ Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
Employment Dates: From \_\_\_\_\_ to \_\_\_\_\_ Telephone ( \_\_\_\_\_ )  
Position/Duties \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

▶ Employer \_\_\_\_\_ Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
Employment Dates: From \_\_\_\_\_ to \_\_\_\_\_ Telephone ( \_\_\_\_\_ )  
Position/Duties \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

*Please list any other employment experience:*

▶ Employer \_\_\_\_\_ Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
Employment Dates: From \_\_\_\_\_ to \_\_\_\_\_ Telephone ( \_\_\_\_\_ )  
Position/Duties \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

▶ Employer \_\_\_\_\_ Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
Employment Dates: From \_\_\_\_\_ to \_\_\_\_\_ Telephone ( \_\_\_\_\_ )  
Position/Duties \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

**On a separate sheet, please answer the following questions:**

1. Describe any aspect of your training or experience (i.e. extra-curricular activities in college, projects directed while teaching) that would be an asset.
2. How do you view your role as a teacher in a Catholic school?
3. How important are your own Christian attitudes and practices in your role as a teacher?

**REFERENCES**

*Please list two professional and two personal references who can speak informatively of your general ability for the work you wish to do. Please send the reference forms from this packet to these people.*

Professional

▶ Name \_\_\_\_\_ Position \_\_\_\_\_  
School/Firm \_\_\_\_\_ Telephone ( \_\_\_\_\_ ) \_\_\_\_\_  
Address \_\_\_\_\_

▶ Name \_\_\_\_\_ Position \_\_\_\_\_  
School/Firm \_\_\_\_\_ Telephone ( \_\_\_\_\_ ) \_\_\_\_\_  
Address \_\_\_\_\_

Personal

▶ Name \_\_\_\_\_ Position \_\_\_\_\_  
School/Firm \_\_\_\_\_ Telephone ( \_\_\_\_\_ ) \_\_\_\_\_  
Address \_\_\_\_\_

▶ Name \_\_\_\_\_ Position \_\_\_\_\_  
School/Firm \_\_\_\_\_ Telephone ( \_\_\_\_\_ ) \_\_\_\_\_  
Address \_\_\_\_\_

**CERTIFICATION AND WAIVER BY APPLICANT**

*I hereby authorize the Catholic Diocese of Evansville to obtain from my previous and present employer(s) all data to support this application. I further agree to hold harmless the Catholic Diocese of Evansville and such employers with regard to their actions in obtaining, providing, and using such information. Any misrepresentation or omission of a fact in this application will subject me to disqualification or termination from employment.*

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_