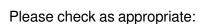
Thank you for your interest in *Owensboro Catholic Schools*.





			Owensboro Cathone Schools				
	I would like to be considered for a teaching position in my academic field.						
	I would like to be considered for a teacher's aide position.						
	I would like to substitute teach for grades:						
	K-12	K-8	_ I would consider a long term sub position.				
	K-6	9-12	7-12				
	Other						
Name							
Address							
Phone Numb	er						

State law requires a criminal records check as a condition for this type of employment and the cost to be paid by applicant. Prior to beginning work, a physical examination, which shall include a tuberculosis assessment and skin test if applicable, is required and at applicant's expense. A copy of the physician's report must be filed with the employer and the Diocesan Catholic Schools Office.

Please return the following with this application:

- 1. Most recent college transcript (65 hours required from an accredited college or university for substitute teaching).
- 2. Valid teaching certificate

If you have any questions, please contact the OCS Central Office at 270-686-8896

Please mail this page and your application to

Owensboro Catholic Schools Attn: Human Resources 1524 West Parrish Avenue Owensboro KY 42301





CHECK TITLE:	Ms. Mr. Dr.	Sister Brother Rev. (Diocesan) Rev. (Religious)		
Last Name	First	Middle	Social Security	Number
Full name of religious	community and initials	(if applicable)	City & State of	provincialate
Home address: no., str	eet, city, state, zip		Home Phone	Cell Phone
Work address: school/	firm, no., street, city, sta	te, zip	Work phone	
Religion:	(Religion is a	a bonafide requirement and infor	rmation solicited meets requ	irements of
Parish or Church and P	astor:			

SECTION 2. EDUCATIONAL BACKGROUND

TYPE OF SCHOOL	NAME OF SCHOOL	CITY AND STATE	DEGREE EARNED	DATES ATTENDED	DATE DEGREE GRANTED

PRACTICE TEACHIN	NG:						
	School		Address, C	City, State, Zip	Date	grade/subject	
	School		Address, C	City, State, Zip	Date	grade/subject	
CERTIFICATION:	G /						
	State/agency	type	area	cert. no.da	te issued	expiration	
	State/agency	type	area	cert. no.da	te issued	expiration	
List major workshops years and which are no						articipated in the last feetings, etc.)	ive
Program-place		sponso	or	date		field	
Program-place		sponso	or	date		field	
Please list all of your to	eacher association an	nd other profe	essional asso	ciation members	hips:		
SECTION 3. PR School where presently		ONAL ASS	IGNMENT	AND EXTRA-C		AR INVOLVEMENT	
			IGNMENT		held	grade(s) taught	
School where presently	y employed	city an	nd state	position(s)	held		
School where presently Street and no.	y employed	city an	nd state	position(s) zip	held	grade(s) taught	7
School where presently Street and no. Subject taught if depar Hours spend in other s If your present teachin	y employed tmentalized chool-related (not prog situation is unique	city and total # eparation) tas (e.g., team te	of students sks. Specify eaching), ple	position(s) zip taught this year . ase explain:	hrs. s	grade(s) taught pent in teaching weekly	7
School where presently Street and no. Subject taught if depar Hours spend in other s If your present teachin	y employed tmentalized chool-related (not pre	city and total # eparation) tas (e.g., team te	of students sks. Specify eaching), ple	position(s) zip taught this year . ase explain:	hrs. s	grade(s) taught pent in teaching weekly	7
School where presently Street and no. Subject taught if depar Hours spend in other s If your present teachin	y employed tmentalized chool-related (not prog situation is unique)	city and total # eparation) task (e.g., team teactivities in w	of students sks. Specify eaching), ple	position(s) zip taught this year ase explain:	hrs. s	grade(s) taught pent in teaching weekly resent assignment or as	

Enter below any CCD or oth adults, in which you assist:	er formally organized of	out-of-school religious	education program	s, for either	children or
Name of parish or school					
Grade level	hours per wee	k	number of stude	ents	
COMMENTS:					
	SECTION 4. F	PREVIOUS EXPERIE	NCE		
POSITIONS IN EDUCATION first.	NAL INSTITUTIONS.	List all prior education	al employment bel	ow. List the	most recent
CITY AND STATE	SCHOOL	YOUR TITLE	GRADE OR SUBJECT	FROM MO/YR	TO MR/YR
OTHER EXPERIENCE					
EMPLOYER AND	ADDRESS	NATURE OF EXI	PERIENCE	FROM MO/YR	TO MO/YR
	SECTION 5. PRO	DFESSIONAL ASPIR	ATIONS		
preference, #2 for seco	in order of preference, tond, etc. Prima Prima Prima Prima eferences:		ich you prefer to w	vork. Use #1	for the first
	nestion 1, describe the se			have most re	cently been

SECTION 6. APPLICANT DATA

List all positions which you are qualified to hold and wish to be considered for, in order of preference.

GRADE LEVEL	SUBJECT OR SPECIALTY		INDICATE FULL-TIME, PART-TIME, OR SUBSTITUTE AVAILABILITY	
I have the following p	reference as to school or	· location in which to te	each:	
REFERENCES: (3 papplying.)	persons able to give in	formation about your	qualification	s for the position for which you are
NAME	E	ADDRESS/PHONE		OFFICIAL POSITION
1				
How soon will you be	available?	_ How long will you	be available (1	final date)
If under contract, whe Reasons for leaving yo	n are you required to sig our present (or most rece	n next year's contract? ent) employment:		
If you have placement	papers on file with a pla	acement bureau or coll	ege placement	t office, give its full name and address:
condition for emplo tuberculosis assessm	yment/volunteering. P	rior to beginning wo	rk, a physicated and at the	ninal history background check as a al examination, which shall include a e applicant's expense. A copy of the Schools Office.
This application is no	ot a contract of employ	ment.		
Date	Signa	ature		
Please enclose the foll	owing with application:	(1) Most recent coll (2) Valid teaching of		t

5