Catholic Schools Office Diocese of Erie

429 East Grandview Boulevard P.O. Box 10397 Erie, Pennsylvania 16514-0397

Application

I. Personal Data

Last Name	First			MI		Social Security Number		
Maiden/Alias Name(s	as Name(s) U.S. Citizen (Yes/		No) e-mail address			Home Phone		
Please list any other name(s) by which you may ha			ve been known in th	e past.		(Cell Phone	e
Home Address	City		State		Zip			
Work Address	City		State		Zip	Work Phone		
Desired Position	n							
Religion: Date Available		_		urch/Parish	Parish	C	lity	
Have you ever been fired from employment? Yes No If yes, provide details on reverse. II. Educational Background								
ype	Name of Scho	01	City/State	Dates of Attendance	Degree(s)	Date of Graduation	on	
igh School								
ollege/University								
ollege/University								
raduate Study								
raduate Study								
43	Certification: List all areas in which you hold a valid Pennsylvania and/or out-of-state teaching certificates.							
Certification List all area	s in which yo		•					a IIga
Certification	s in which yo		valid Pennsyl suing State	vania and/or out Date	-of-state teac		icates.	e Use
Certification List all area	s in which yo		•					e Use
Certification List all area	s in which yo		•					e Use
Certification List all area	s in which yo		•					e Use

Sponsor

Field

Date

Program/Place

Educational or Work Experience List Present or Most Recent First III.

Dates	Name of Employer and Ado	dress	Your Title	Office Use Only
From			_	
То				
	(XXX)Telephone			
Work Performed	()	Reason for Leavi	ing	
Name and Title of Supervisor		Final Yearly Salary		
Dates	Name of Employer and Ado	dress	Your Title	
From				
То				
	(XXX)Telephone			
Work Performed		Reason for Leavi	ing	
Name and Title of Supervisor		Final Yearly Salary		
Dates	Name of Employer and Ado	dress	Your Title	
From				
То				
	(XXX)Telephone			
Work Performed		Reason for Leavi	ng	
Name and Title of Supervisor		Final Yearly Salary		
Dates	Name of Employer and Ado	dress	Your Title	
From				
То				
	(XXX)Telephone			
Work Performed		Reason for Leavi	ng	
Name and Title of		Final Yearly		
Supervisor		Salary		

IV. Student Teacher or Other Work Experience

Placement	Area of Work	Supervisor	Office Use Only

V. References

References should include supervisors who have first-hand knowledge of your professional competence and your personal qualifications.

Name	Position	Address	Telephone	Office Use

VI. Short Essay Questions

1.	Briefly	state v	vour	philoso	phy	of e	education	ı.

2. What Particular talents or skills will you bring to this position?

Date	Signature
am not in the habit of using narcotic dreating (School Code 1209); and that the informal misrepresentation of facts in this application of the employer. I testify that I have no attempted sexual molestation of a minor	d States (or an exchange teacher not permanently employed); that I ugs in any form or excessive amounts of intoxicating beverages mation on this application is correct. I understand that any cation will be considered just cause for dismissal at the discretion ever been convicted of child abuse or a crime involving actual or or. No formal or informal unresolved charge, claim or complaint ould call into question the advisability of entrusting me with the tren and youth.
All required documents must be submit complete applications will be eliminate	tted before your application will be processed. Candidates without ed.

3. Why would you choose to serve in the Catholic Schools of the Diocese of Erie?