

Job Application

Applicants are considered for all positions without regard to race, color, sex, national origin, age, marital or veteran status, or the presence of non-job related medical conditions or handicap.

Please print or type:

	Applicant Information	
Name		
Last	First	Middle Initial
Address		
Street Address		Apartment/Unit #
City	State	Zip Code
Phone:	Cell Phone:	Email:
·	r	D
• • • •	ication for Loretto Academy before? yearlate:	
•	nployed at Loretto Academy before?	es □ no
	or relatives work at Loretto Academy?	□yes □ no
Are you employed now	√? □yes □ no	
	resent employer? \square yes \square no	
On what date are you a	vailable to start work?	
Expected Salary – Rang	ge:	
Are you bilingual? □y		
If yes, what languages?		

Name of schools attended	Dates Atter	nded	Degree Conferre	ed or Date of Gr	adua
(College or University)	From: T		Number of Hou		
Teaching and Administrative	e Certificates or lic	enses issued	d to you:		
Title of Certificate or	Issuing State	or City	Effective Date	e Valid fo	r wh
License				Subject	Area
				I	
If you received alternative con College/University:					
Conege/Oniversity	Regional Servic	e Center	Otner		
If you do not have a teaching	g certificate, when	do you expe	ect to receive it?:		
Teaching and Administrative	e Experience				
_	_	_			
Name and School District	Grade or Subjects Taught	Dates From: To	Number of years	Reason for lea	wing
	Subjects raught		j. or years		

Employment Other than Teaching

Please list below all non-teaching positions held in the past ten (10) years. Attach an addendum or resume if work history is extensive

Position		Type of Work	Dates From: To:	Salary	Name and Address of Employer	
_						
		Educati	onal Backgrou	and		
		Educani	oliai backgiou	<u>IIIQ</u>		
Estimate the numb	er of credi	it hours earned in th	he following a	reas:		
Education	_ English ₋	Fine Arts _	Forei	ign Languages	Science	
Social Studies	Matl	hematics l	Education	Technol	logy	
Bachelor's Degree	: :					
M 4 Daggar	 Major		Minor	Date	University	
Master' Degree: _	Major		Minor	Date	University	
PhD:	Major		Minor	Date	University	
		F	References			
-	List names of professional references (Superintendent, Principal, Supervisor, or College Professor) that are knowledgeable of your ability to accept this role.					
are knownedgeaux) Of your a	Dility to accept ans	Tole.			
Professional Refer	ences					
Full Nam	ie.	Title	Add	lress	Phone	
-						

Character References

Full Name	Title	Address	Phone
	Additi	onal Information	
Is there anything that would If yes, please explain	- •		•
Have you ever been asked to teaching or otherwise? ☐ ye If yes, please explain	es 🗆 no	, and the second	•
Have you ever been convicted deferred judgment, pleaded of the second of	no contest, or serve	ed time in prison? \square yes \square	
I certify that the information knowledge. I understand that for disqualification, or if I as Here:	t falsification of fa	ct in this application will b	e considered sufficient cause
I understand that the Loretto accreditation by the Texas C background check. I hereby Here:	Catholic Conference	e Education Department an	
Further, I understand any en	nployment is contin	ngent on completing the Vi	rtus Training.
Signature of Applicant			