



The Diocese of Jefferson City
Office of Catholic Schools

Substitute Teacher Application Form

General Information

Name				
	Last	First	Middle	Maiden

Address				
	Address	City	State	Zip Code

Phone #		Email Address	
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Personal Information

Single <input type="checkbox"/>	Married <input type="checkbox"/>	Social Security #	Date of Birth (m/d/yyyy)
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Religion	Have you been baptized in the Catholic Church? Yes <input type="checkbox"/> No <input type="checkbox"/>
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Parish/Church

Have you ever been convicted of any offense? If so, explain:

Educational Preparation

	Name and Location of School or College	From m/yyyy	To m/yyyy	Kind of Degree	Major	Year of Grad.	Sem Hours Credited
Elementary School							
Secondary School							
Colleges & Universities							

Previous Employment (Please List Most Recent Employer First)

School or Company Name & Address	From m/yyyy	To m/yyyy	Position or Subjects and/or Grades Taught	Annual Salary	Reason For Leaving

Certificate(s) Held

State	Life or Temporary	Specification (Level of Teaching & Subjects)	Year Issued	Year Expired

Subject areas you are willing & qualified to teach (please check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Religion (Must be Catholic) | <input type="checkbox"/> Language Arts |
| <input type="checkbox"/> Math | <input type="checkbox"/> Science |
| <input type="checkbox"/> Social Studies | <input type="checkbox"/> Art or Music |
| <input type="checkbox"/> PE / Health | <input type="checkbox"/> Computer Science |

Grade level you are willing & qualified to teach (please check all that apply):

- | | | | | |
|---------------------------------------|--|------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Kindergarten | <input type="checkbox"/> 1st | <input type="checkbox"/> 2nd | <input type="checkbox"/> 3rd | <input type="checkbox"/> 4th |
| <input type="checkbox"/> 5th | <input type="checkbox"/> 6 th | <input type="checkbox"/> 7th | <input type="checkbox"/> 8 th | <input type="checkbox"/> High School |

Days you are available to teach (please check all that apply):

- | | | | | |
|---------------------------------|----------------------------------|------------------------------------|-----------------------------------|---------------------------------|
| <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday | <input type="checkbox"/> Friday |
|---------------------------------|----------------------------------|------------------------------------|-----------------------------------|---------------------------------|

Hours you are available to teach:

- | | | |
|--|--|------------------------------|
| <input type="checkbox"/> AM/Morning – 8am – noon | <input type="checkbox"/> PM/Afternoon – noon – 3pm | <input type="checkbox"/> Any |
|--|--|------------------------------|

Are you qualified and available for long-term assignments this year? Yes No

I hereby authorize investigation of all statements contained in this application and certify that all information included herein is complete and accurate. I understand that a misstatement of fact would be grounds for my discharge.

Today's date:

Thank you for your interest in substituting in the Catholic schools of the Diocese of Jefferson City.

Please complete and return this application for substitute teaching along with a *Request for Child Abuse/Criminal Background Record Form* and a *Safe Environment Form* – which are provided on our website. When completed, please mail the background checks to the Catholic School Office and deliver the application to the school(s) in which you are interested in substituting. Also, please visit www.virtus.org to sign-up for a “Protecting God’s Children” session which is a requirement to work/volunteer in our schools.

Substitutes shall have 60-110 college hours for 45 days per year; 120 hours and up for 90 days per year.

If you have any questions, please feel free to contact the Catholic School Office at 573.635.9127 X248.

**Diocese of Jefferson City
Catholic School Office
P. O. Box 104900
Jefferson City, MO 65110**

FAX 573.635.2286