

Catholic Schools Office  
Diocese of Erie  
P.O. Box 10397  
Erie, PA 16514-0397  
Phone: (814) 824-1248

Dear Applicant,

We appreciate your interest in teaching in the Catholic Schools of the Diocese of Erie. Prior to your data being placed on an approved applicant personnel list, the following items are needed for your professional file:

1. Completed "School Educator Employment Application" form (required)  
PDE application (optional but additional to "School Educator Employment Application")
2. A copy of your resume
3. Completed health certificate, dated within the last year
4. A copy of your teaching certificate from the Pennsylvania Department of Education
5. A copy of your Act 34, Employee Background Check, dated within the last year
6. A copy of your Pennsylvania Child Abuse History Clearance, dated within the last year
7. Registration ID number for FBI Criminal History (fingerprinting)
8. A letter discussing your philosophy of education and why you wish to teach in the Erie Diocesan Schools
9. Official College Transcripts, mailed directly to our office from the college

Because we expect to process so many applications this year, it will be impossible to consider incomplete applications.

After your file is complete and reviewed, you will be notified regarding the status of your application. The Catholic School Office **requires an annual notification that you wish to have your name remain on the available teacher list.** To keep our list current, we appreciate your consideration in letting us know if you are hired by another school district.

If you have any further questions, please feel free to call this office.

Director of Curriculum and Teacher Personnel

814.824.1248

## School Educator Employment Application

### SECTION 1: PERSONAL DATA

<i>Last name</i>	<i>First name</i>	<i>Middle Initial</i>	<i>Social Security Number</i>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>Maiden name</i>			<i>U.S. Citizen?</i>
<i>Home Address</i>			<i>Home Phone</i>
<i>City      State      Zip</i>			
<i>Email Address</i>			<i>Cell Phone</i>
<i>Work Address</i>			<i>Work Phone</i>
<i>City      State      Zip</i>			
<i>Religion</i>		<i>Church attended / address</i>	

### SECTION 2: EDUCATIONAL BACKGROUND

Type of School	Name of School	City/State	Dates attended	Degree	Graduation
High School					
College/ University					
Other					

### SECTION 3: PRACTICE TEACHING

<i>School</i>	<i>City/State</i>	<i>Dates</i>	<i>Grade/Subject</i>
<i>School</i>	<i>City/State</i>	<i>Dates</i>	<i>Grade/Subject</i>

### SECTION 4: CERTIFICATION

<i>State/Agency</i>	<i>Type</i>	<i>Area</i>	<i>Cert. #</i>	<i>Date issued/Expiration Date</i>
<i>State/Agency</i>	<i>Type</i>	<i>Area</i>	<i>Cert. #</i>	<i>Date issued/Expiration Date</i>

**SECTION 5: PREVIOUS EXPERIENCE**

Include all full-time educational and non-educational experience during the past five years, whether or not it has pertinence for a position in education. List most recent experience first. If needed, please attach an extra sheet.

Employer Name and Address	Nature of Experience	From Month/Yr.	To Month/Yr.

**SECTION 6: NEW APPLICANT DATA**

List all positions which you are qualified to hold and for which you want to be considered.

Preference	Grade Level	Subject or Specialty	Full Time / Part Time / Substitute
1			
2			
3			
4			

I have the following preference as to school or location in which to teach: \_\_\_\_\_

**SECTION 7: REFERENCES**

List three persons able to give information about your qualifications for the positions for which you are applying.

Name	Address	Official Position

How soon will you be available? \_\_\_\_\_

Reasons for leaving your present or most recent employment: \_\_\_\_\_

I certify that I am a citizen of the United States (or an exchange teacher not permanently employed); that I am not in the habit of using narcotic drugs in any form or excessive amounts of intoxicating beverages (School Code 1209); and that the information on this application is correct.

I understand that any misrepresentation of facts in this application will be considered just cause for dismissal at the discretion of the employer.

I testify that I have never been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor. No formal or informal unresolved charge, claim or complaint has ever been made against me that would call into question the advisability of entrusting me with the supervision, guidance and care of children and youth.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of Applicant

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**Health Certificate**

Name of Applicant \_\_\_\_\_

I certify that I am a physician legally qualified to practice medicine in a state of the United States or its capital; that I have examined and find the above-named applicant "neither mentally nor physically disqualified, by reason of tuberculosis or any other communicable disease or by reason of mental disorder from successful performance of the duties of a teacher." (School Code 1209)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Physician

\_\_\_\_\_  
Signature of Examining Physician

\_\_\_\_\_  
State in which licensed

\_\_\_\_\_  
Physician Number