

This application must be filled in completely and accurately for processing.

PERSONAL DATA

Application Date _____
Month Day Year

Applicant Name _____
Last First MI

Religious Affiliation _____ Practicing Catholic? Yes No

Parish _____

Address _____
Street Apt #

_____ *City State Zip*

Phone Number (____) _____

E-mail Address _____

How many years of Preschool teaching experience do you have? _____ Total Years

How many years of Preschool Directorship do you have? _____ Total Years

Years	Number of Months	Position	School Name City, State	Grade(s) or Subject(s)	Reason for Leaving

Have you ever been convicted of a felony, a misdemeanor, or any offense involving child abuse/molestation? Yes No

Has a civil or criminal complaint ever been filed against you alleging physical abuse or sexual abuse by you? Yes No

Have you ever terminated your employment or had your employment terminated for reasons relating to allegations of physical abuse or sexual abuse by you? Yes No

If you answered "yes" to any of the three previous questions, please attach an explanation.

Do you use illegal drugs? Yes No

INSTITUTIONS OF HIGHER LEARNING ATTENDED

College/University	Location	Dates Attended	Credits/Semester Hrs	Credits/Qtr Hrs

DEGREE(S) ATTAINED

Degree	Date	College/University	Major	Minor

Do you hold a valid Colorado Preschool Director’s License Yes No

If “Yes”, please complete:
Type _____ *Number* _____ *Exp Date* _____

For information concerning certification and qualification for the Alternative Licensure Program, write to: Colorado Department of Education, 201 East Colfax Avenue, Denver, CO 80203 or phone 303.866.6628.

SAFE ENVIRONMENT TRAINING

Have you attended a Safe Environment Training Session? Yes No

If yes, please specify:
Date _____
Location _____

REFERENCES

Have you ever been employed by the Archdiocese of Denver Catholic Schools? Yes No

If “Yes”, under what name? _____

If “Yes”, which schools?
School _____ *Year* _____
School _____ *Year* _____
School _____ *Year* _____

List three (3) references below. If you have had teaching experience, name all principals under whom you have taught within the last eight (8) years. If you have had no teaching experience, list the names of previous employers and/or supervisory teachers.

Name	Address/City/State	Phone Number	Institution/Organization	Position

I hereby attest to the accuracy and completeness of all information provided above. I understand references will be contacted, and a police check may be made to verify information provided.

Applicant Signature

Date

Applicants are responsible for notifying the Office of Catholic Schools when they take a position or when, for some reason, they wish to have their application withdrawn from the active files. Applications, if properly completed, will be kept at the Office of Catholic Schools for two (2) school years, or until the applicant is hired, whichever comes first. If the applicant is not hired by the end of the two (2) years and he/she still wishes to be considered for a position, the applicant must reapply.

Return the completed application, all paperwork requested to:

**Paul R. Mott, Principal
 STM Catholic
 7071 East Otero Avenue
 Centennial, CO 80112
 303.770.0441**

Or

E-mail: paulm@stthomasmore.org

The Archdiocese of Denver’s Catholic Schools are an investment in the future of our children and our Catholic faith.

