Archdiocese of Louisville Office of Catholic Schools Application		Subi	Submit <u>completed application</u> , <u>resume</u> , and <u>cover letter</u> to:		
			Pastoral Center Office of Catholic Schools Attn: Assistant Superintendent of Schools 3940 Poplar Level Road Louisville, KY 40217 Or Email: <u>schools@archlou.org</u>		
A. Applicant In	formation				
Name(I	Last)	(First)	(Mi	ddle)	(Maiden)
Address					
(St	reet)	(City))	(State)	(Zip)
Email Address:			Phone Number:		
(Highest Degree)	(College/University)		(Year Graduated)	(Major)	(Minor)
(Next Degree)	(College/University)		(Year Graduated)	(Major)	(Minor)
(Third Degree)	(College/University)		(Year Graduated)	(Major)	(Minor)
(High School Attended)			(City)	(State)	(Year Graduated)
					(Year Graduated)

B. Certification Information: Indicate whether yo	u have any of the following:	(Not Applic
Valid teaching certificate from the state of KY	Expires:	

Expires:

Valid teaching certificate from another state

Area of certification:

Availability Date: _____

Are you currently under contract? Yes 🗆 No 🗀 If yes, name of school or system:

Are you a member of the Catholic faith? Yes \Box No \Box

(Membership in the Catholic faith is not a prerequisite for employment. However, the Archdiocese reserves the right to give preference in hiring to Catholics, particularly for those positions requiring the teaching of religion.)