



APPLICATION FORM
Teacher

ST. PATRICK'S CATHOLIC SCHOOL
20500 W Maple Road
ELKHORN, NEBRASKA
<http://school.stpatselkhorn.org/>

Mail application to above address or email to Mary Olson at molson@stpatselkhorn.org.

Position for which you are applying: _____

Teaching Certification Area: _____

A. PERSONAL INFORMATION

Name _____
(last name) (first name) (middle initial)

Home Address _____

City, State, Zip _____

Cell Phone _____ Work Phone _____

Email Address _____

Date Application Submitted _____

B. CURRENT POSITION

Title _____ Since _____

Employer _____

Employer Address _____

City, State, Zip _____

C. EDUCATIONAL BACKGROUND

Please list the colleges or universities you have attended and the degrees received. List them in order, beginning with the most recent.

Name/Location of Institution	Year(s) Attended	Degree	Major

D. TEACHING EXPERIENCE

Please list teaching experience, beginning with your current assignment.

Position	Principal/Supervisor & Phone Number	Name of District	Years Employed

E. REFERENCES

Please list three individuals who are very familiar with your professional work and who may be contacted.

1. Name: _____ Position: _____

Phone: _____ Email: _____

2. Name: _____ Position: _____

Phone: _____ Email: _____

3. Name: _____ Position: _____

Phone: _____ Email: _____