

# Teacher Application

## Cathedral-Carmel School

848 St. John Street . Lafayette, La. 70501 . (337) 235-5577



### PERSONAL

Name \_\_\_\_\_

Religion \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address: \_\_\_\_\_

### EDUCATION

Degree(s) Earned \_\_\_\_\_ College Granting \_\_\_\_\_

Area(s) of Certification \_\_\_\_\_

Elementary Grades \_\_\_\_\_

Secondary Subjects \_\_\_\_\_

Special Education \_\_\_\_\_

Grade Level / Subject area for which you are applying \_\_\_\_\_

Grade Preference, if any \_\_\_\_\_

LA Teaching Certificate Type/No \_\_\_\_\_ Issue Date \_\_\_\_\_ Expires \_\_\_\_\_

Do you hold a certificate from another state? \_\_\_ Issued \_\_\_ Expired \_\_\_\_\_

### TEACHING EXPERIENCE

*(See attached resume)*

### REFERENCES

*(See attached resume)*

*Please attach current resume, transcript, and teaching certificate to this application.*

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

CCS

*Christ Centered Students*