



DIOCESE OF WILMINGTON

Catholic Schools Office • 1626 N. Union Street • Wilmington, DE 19806
(302) 573-3133 - Phone • (302) 573-6945 - Fax • www.cdow.org

SUBSTITUTE APPLICATION

Last Name	First	Middle	Social Security No.	Date
Present Street Address	City	State	Zip	Date of Birth
Permanent Address (if different from present address)			Home Phone Number	
E-Mail Address			Cell Phone Number	

I have been employed in the Catholic Schools in the Diocese of Wilmington Yes No If yes, complete the following information:

Name of School _____ Dates employed From _____ To _____

Position(s) held _____

Substitute Position desired: (please check all that apply)

Elementary – Check grade(s) you prefer _____ PreK _____ K _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8

Secondary – Check grade(s) you prefer _____ 9 _____ 10 _____ 11 _____ 12

Subjects _____

I hold a valid Delaware or Maryland Teaching Certificate/License Yes No State _____

Area(s) of Certification/Licensing _____

Expiration Date _____

I am a U.S. citizen or an alien authorized to work in the U.S. Yes No

Have you ever been dismissed from a position? Yes No If yes, please explain:

The Catholic schools in the Diocese of Wilmington comply with the Civil Rights Act of 1964 and do not discriminate on the basis of race, color, national and ethnic origin, handicap, sex, age, disability, or political beliefs in the administration of their admissions, athletic, education, loan, personnel, scholarship programs or other administered programs. Acceptance of this form does not constitute a contract of employment nor is it a commitment to the applicant.

EDUCATION HISTORY – Please do NOT write “see resume” or “see curriculum vitae” in the spaces listed below. Use additional pages as needed.

NAME AND LOCATION OF SCHOOL	Years Attended	Date of Graduation	Degree Received
Elementary			
Secondary			
College(s)			
Postgraduate School			

EMPLOYMENT HISTORY – Please do NOT write “see resume” or “see curriculum vitae” in the spaces listed below. List all present and former employment beginning with your present or most recent position. Use additional pages as needed.

Employer Name		Phone Number ()
Address		Employed (Month & Year) From: To:
Supervisor	Title	Position Held
Reason for Leaving		
Employer Name		Phone Number ()
Address		Employed (Month & Year) From: To:
Supervisor	Title	Position Held
Reason for Leaving		
Employer Name		Phone Number ()
Address		Employed (Month & Year) From: To:
Supervisor	Title	Position Held
Reason for Leaving		
Employer Name		Phone Number ()
Address		Employed (Month & Year) From: To:
Supervisor	Title	Position Held
Reason for Leaving		

PROFESSIONAL REFERENCES – List three persons who have first-hand knowledge of your professional ability to succeed in your position of interest (supervisor, principal, department head, etc.) Recent graduates may substitute their placement file from college.

Name: _____ Phone: () _____ Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Length of Service (yrs & mos.): _____
Name: _____ Phone: () _____ Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Length of Service (yrs & mos.): _____
Name: _____ Phone: () _____ Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Length of Service (yrs & mos.): _____

PERSONAL DATA – IMPORTANT: Please read each question before answering. You must complete 1-4 in order to be considered for a position involving significant contact with children.

1. Has a civil or criminal complaint ever been filed against you that alleged sexual misconduct or child abuse by you or your participation in or facilitation of such activities (including internal complaints given to management or supervisors at places of employment)? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, explain in full (attach a separate sheet of paper if necessary): _____

2. Have you ever served or do you presently serve as an employee or a volunteer in a non-teaching capacity for any organization in which you had significant contact with children or other vulnerable populations (e.g. elderly, mentally or emotionally handicapped, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, explain in full (attach a separate sheet of paper if necessary): _____

3. Have you ever chosen not to renew or continue any employment or volunteer services, had your employment or volunteer service terminated, or been subject to any disciplinary action, for reasons relating to allegations or sexual misconduct or child abuse by you? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, explain in full (attach a separate sheet of paper if necessary): _____

4. Have you even been convicted of a crime (felony or misdemeanor) other than a minor traffic violation? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, explain in full (attach a separate sheet of paper if necessary): _____

Substitute Teacher Application Supplement

Directions: Please answer each of the questions given below as best as you can. The space provided should be adequate, but if more space is needed, please attach additional pages.

1. Why do you want to be a substitute teacher in a Catholic school?

2. Identify areas of service to the community and church in which you have recently been involved. Have any of these experiences been with young people, such as clubs, camps, extra curricular activities, or sports? Please explain.

3. How does your life reflect the Christian values being fostered in Catholic schools?

4. How do you go about creating a respectful classroom?

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Each applicant for an substitute position is required to file with this office an official college transcript(s) of his/her completed courses, two letters of recommendation, a copy of the State of DE/MD Teaching Certificate/License, Proof of a Mantoux Tuberculosis Skin Test (PPD) given within 3 years, and an original criminal background check from the Delaware or Maryland State Police.

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I hereby certify that the above statements are true, correct, and complete to the best of my knowledge and hereby agree that any contract based upon this application is not valid unless all conditions for employment have been fulfilled and that any deliberate falsification of facts may be grounds for revocation of my contract and dismissal from employment. I authorize you to communicate with all my former employers, school officials and persons named as references. I hereby release all employers, school officials and individuals from any liabilities for any damage whatsoever resulting from giving such information. Further, I grant permission to the Diocese of Wilmington to release this application and attendant documents to the appropriate principals, pastors, search committees and prospective employers within the Diocese of Wilmington.

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Signature

Date