



ARCHBISHOP CHAPELLE HIGH SCHOOL

APPLICANT INFORMATION FORM

Date: _____ / _____ / _____
Month Date Year

Name: _____
First Last

Date available: _____ / _____ / _____
Month Date Year

Department of Interest: _____

Address: _____
Street City State Zip

Phone: _____

Email: _____

Date of Birth: _____ / _____ / _____
Month Date Year

Are you a U.S. citizen? Yes No

Practicing Catholic Other Christian Denomination Other Church: _____

College/University Attended: _____ Degree(s)/Major(s): _____

Teaching Certificate Type/Number: _____ Expiration: _____

Number of college credit hours earned in the field of education: _____

List all subject areas in which you have earned twelve (12) or more hours of college credit.

Please describe any aspect of your training or experience that would assist you in the position for which you are applying.

Why do you want to work in a Catholic school?

In what ways does your lifestyle reflect Catholic values?



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Our school motto is *Deus Providebit...God will Provide*. Please explain what this means to you and how you would strive to live out this motto as an employee of Archbishop Chapelle High School.

If applying for a teaching position, please describe your teaching style.

If applying for a teaching position, please describe your style of classroom management.

Have you ever been terminated or recommended for dismissal by your employer?

Yes No

Have you ever been convicted of a felony?

Yes No

If you answered "yes" to one of the above questions please attach an explanation.

Archbishop Chapelle High School is an equal opportunity employer and does not discriminate against applicants or employees on the basis of race, age, sex, disability, or national origin. This non-discrimination policy applies to hiring, training, promoting, salaries, transfers, and working conditions.

By signing below you verify that you understand that any omission or misrepresentation on this application and/or requested documents may result in refusal of employer to hire if offered employment or in the termination of such employment if hired. In addition, your signature gives Archbishop Chapelle High School permission to contact references and previous employers.

Applicant Signature: _____ Date: ____/____/____

Please include the following documents when submitting application:

1. Applicant Information Form
2. Resume or CV with Cover Letter
3. Copies of transcripts for college credit earned
4. Three references

Please send all documents to:

Associate Head of School
Archbishop Chapelle High School
8800 Veterans Memorial Blvd.
Metairie, LA 70003

Or email to:

spanzavecchia@archbishopchappelle.org



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AUTHORIZATION AND RELEASE

I, _____ hereby authorize Archbishop Chapelle High School
(Applicant)

to request any and all employment records from any and all of my former employers for review as part of my application for prospective employment and/or to discuss my prior employment verbally with any representatives of my prior employers. In consideration of the acceptance of my application for employment, I hereby agree to release, defend, indemnify and hold harmless Archbishop Chapelle High School, its members, directors, officers, administrators, principals, teachers and/or employees and any former employer, their members, directors, officers, administrators, principals, teachers and/or employees from any and all claims, demands and/or causes of action arising from the sending, receipt and/or review of the aforementioned employment records and/or from any verbal discussion of my prior employment.

Signature of Applicant

Date