



APPLICATION FOR SUBSTITUTE EMPLOYMENT

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

DATE OF BIRTH: _____

SOCIAL SECURITY NUMBER: _____

RELIGION: _____

CERTIFIED TEACHER: _____ YES _____ NO

DEGREE: _____

UNIVERSITY: _____

DATE OF GRADUATION: _____

Which positions would you be interested in substituting for:

PreK – Grade 8

9- 12

Please check which schools you are available to substitute:

- Our Lady’s School – Sulphur
- St. Margaret Catholic School – Lake Charles
- Immaculate Conception Cathedral Catholic School – Lake Charles
- Our Lady Queen of Heaven Catholic School – Lake Charles
- St. Theodore Holy Family Catholic School – Moss Bluff
- Our Lady Immaculate Catholic School – Jennings
- St. Louis Catholic High School – Lake Charles

I hereby understand that I am responsible for filling out a civil scan form for a criminal background check and I must complete the Safe & Sacred Environment Training Program before I can sub at one of the schools in the Diocese of Lake Charles. In addition, LA ACT 634 requires all non-certified substitutes to receive a Teaching Authorization from the LDOE. This will be submitted on your behalf once a completed background check is received.

Signature of Applicant _____

Date _____