



ARCHDIOCESE OF PORTLAND  
IN OREGON

Department of Catholic Schools  
**SUBSTITUTE TEACHING COVER SHEET & CHECKLIST**

Name: \_\_\_\_\_

Complete and submit the following:

- Archdiocesan Application form
- Substitute Information form
- License History Information
- Current resume

Authorization for Disclosure of Information forms (1 form for each of your **3 most recent** education provider employers – fill out **Sections 1 and 2.**)

Copy of teaching license

Copy of participation certificate for *Called to Protect for Parents and Ministries* training (Training schedule: <http://www.archdpx.org/child-protection-victim-assistance>)

Email or send to: Dina Boyle ([dboyle@archdpx.org](mailto:dboyle@archdpx.org))  
Department of Catholic Schools  
2838 E. Burnside St.  
Portland, OR 97214

If you have any questions, please do not hesitate to contact Dina at 503-233-8348.

# EMPLOYMENT APPLICATION

(School, Child Care Facility, Preschool Program, etc.\*)

Date: \_\_\_\_\_

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone # (work): \_\_\_\_\_ (home): \_\_\_\_\_ (mobile): \_\_\_\_\_

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

May we call you at your current employment? Yes  No

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We are committed to providing equal employment opportunities for all persons without discrimination based on race, color, sex, national origin, age, disabilities, veteran status, or on-the-job injuries. As a religious organization, however, we are not subject to various anti-discrimination laws based on religion or religious belief and may make hiring and other employment decisions based on religious belief or practice.

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## GENERAL INFORMATION

Position applied for: \_\_\_\_\_

Available to work: Full-time  Part-time  Temporary

Do you have a legal right to work in the US?.....Yes  No

Are you at least 18 years of age?.....Yes  No

Religious affiliation: \_\_\_\_\_

Have you ever worked or volunteered for the Catholic Church or a similar organization?.....Yes  No

If yes, where? \_\_\_\_\_

\*This form may be used for a position in which federal, state, or local law requires consideration of an applicant's criminal history.

## EDUCATION

Name & Address of School	Major	Years Completed	Degree(s)
High School			
College			
College			
Other (Specify)			

1. Please summarize any skills, training, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position you are applying for:

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2. Why do you want to be considered for employment here?

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3. Please list any job-related professional trade, business, civic activities, organization, and/or associations. (You may choose to omit those that indicate race, color, national origin, ancestry, or disability, etc.)

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4. Are you able to perform all the essential functions of the job you are applying for with or without reasonable accommodation?  
 Yes       No       If no, please explain:

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5. Have you ever been convicted of a crime? .....Yes       No   
 (A conviction is not an automatic bar to employment. Each case will be considered on its own merits)

6. Are you currently charged with a crime? .....Yes       No   
 If yes, please explain:

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7. If yes, have you ever been the subject of allegations related to misconduct with children?.....Yes       No   
 If yes, please explain:

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## EMPLOYMENT HISTORY

Please list your present and past work experience for the last 10 years beginning with your current job. We will contact your current/most recent employer only after an offer has been extended unless you indicate below that we may contact them now. You may include volunteer activities/positions. Attach an additional page if necessary. Please complete this section even if you have submitted a resume.

<b>Current Employer</b>	Name of employer:		
	Telephone #:		
	Address:		
	Employment Dates:	(From)	(To)
	Position:	Supervisor:	
Description of duties:	Ok to contact?		Yes <input type="checkbox"/> No <input type="checkbox"/>
	Reason for leaving:		

<b>Previous Employer</b>	Name of employer:		
	Telephone #:		
	Address:		
	Employment Dates:	(From)	(To)
	Position:	Supervisor:	
Description of duties:	Reason for leaving:		

<b>Previous Employer</b>	Name of employer:		
	Telephone #:		
	Address:		
	Employment Dates:	(From)	(To)
	Position:	Supervisor:	
Description of duties:	Reason for leaving:		

Have you ever been suspended, or asked to resign a position?      Yes       No

Is there anything else you would like to tell us about yourself that would help qualify you for this job?

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## PROFESSIONAL REFERENCES

Please provide the names of at least 3 people who have known you in a professional capacity for at least 5 years (other than family members):

Name/Job Title	Organization	Telephone #	Years Known

## CERTIFICATION AND AUTHORIZATION INFORMATION RELEASE

I certify that the information in this application is true and correct to the best of my knowledge, and I agree to allow the Employer to verify any of this information, unless I indicate in writing to the contrary. I authorize the references and other persons listed on this application, as well as other persons contacted, to verify this and other information I supply in connection with this application, to provide any and all information concerning my previous employment, and/or to supply any other pertinent details they may have. I also release and discharge to the extent permitted by law the Employer, its employees, any individual or agency obtaining information for the Employer, my personal and professional references, and my former employers, from any and all claims, damages, losses, liabilities, costs, and other expenses from disclosing information in connection with this application. I understand that any misrepresentation, falsification, or substantial omission on this application may result in my failure to receive an offer or, if I am hired, my dismissal from employment.

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Applicant

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Date

## AT-WILL EMPLOYMENT STATEMENT

I understand that, if I am hired, in the absence of a written employee agreement that states otherwise, I may terminate my employment with the Employer at any time, for any reason. The Employer may do the same. This application does not constitute an agreement or contract for employment for any specified period or definite duration.

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Applicant

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Date

## BACKGROUND CHECK STATEMENT

I understand that all offers of employment are contingent upon providing satisfactory proof of my identity and legal authority to work in the United States and successful completion of a criminal background check. A background check may include my driving records, court records (civil and criminal), educational and professional credentials, and personal and professional references. This information, which may come from public or private sources, may contain details on my character, experience, work habits, and/or reasons for termination from past employers.

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Applicant

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Date

**ARCHDIOCESE OF PORTLAND**  
**Department of Catholic Schools**

**REQUEST FOR LICENSING HISTORY INFORMATION**

Name \_\_\_\_\_

OREGON STATE LICENSE: YES \_\_\_\_\_ NO \_\_\_\_\_ IN PROCESS \_\_\_\_\_

If yes, what type? \_\_\_\_\_

Endorsements: \_\_\_\_\_

If no Oregon license indicate State and type of license held: \_\_\_\_\_

\_\_\_\_\_

Questions: You must answer each question by writing “Yes” or “No” whichever is true. Any “Yes” answer must be fully explained on a separate page.

Have you ever been released or have you ever resigned from any educational position or school related employment because of misconduct or unsatisfactory service?
Have you ever resigned from an educational position while under investigation for misconduct or unsatisfactory service?
Have you ever failed to complete a contract for professional service in any educational position?
Have you ever had a teaching license revoked or suspended?
Have you ever been denied a teaching license for which you applied?
Have you ever surrendered a teaching license before its expiration?
Have you ever been disciplined by a state agency responsible for licensure of educators?

I hereby certify that, to the best of my knowledge, the information contained on this form is true, correct, and complete and authorize the Archdiocese to perform background checks for the employer, including review of civil or criminal records to verify information provided. I release all persons and entities from any and all liability for any damages that may result from providing information in connection with this background check. I understand that any misrepresentation, falsification, or material omission of information on this form may result in my failure to receive an offer of employment or, if I am hired, my dismissal from employment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**ARCHDIOCESE OF PORTLAND**  
**Department of Catholic Schools**  
**SUPPLEMENTAL SUBSTITUTE INFORMATION**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

WHAT IS YOUR QUALIFICATION FOR SUBSTITUTE TEACHING IN THE ARCHDIOCESE OF PORTLAND?

- CURRENT OREGON TEACHING LICENSE
- EXPIRED OREGON TEACHING LICENSE – RENEWAL IN PROCESS
- CURRENT/ACTIVE OUT-OF-STATE TEACHING LICENSE
- PLEASE CONTACT ME ABOUT A SPONSOR LETTER FOR AN OREGON RESTRICTED SUBSTITUTE LICENSE, AS LISTED BELOW:

TSPC REQUIREMENTS

1. Submit an e-licensing application with TSPC and pay the fee;
2. Have a letter of sponsorship from the Department of Catholic Schools which will be submitted directly to TSPC;
3. Be 18 years or older;
4. Hold a Bachelor's degree or higher (regionally accredited or foreign equivalent);
5. Pass the required Protecting Student and Civil Rights in the Educational Environment exam;
6. Pass a criminal background clearance, including fingerprints.

YEARS OF TEACHING EXPERIENCE: SUBSTITUTE: \_\_\_\_\_ REGULAR: \_\_\_\_\_

GRADE LEVELS PREFERRED:  PreK  K  1  2  3  4  5  6  7  8

SUBJECT PREFERENCES: 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

GEOGRAPHIC PREFERENCE (  A REGION TO SUB IN ALL SCHOOLS IN THAT REGION OR  INDIVIDUAL SCHOOLS IN A REGION.)

**REGION I**

\_\_ O'Hara, Eugene  
\_\_ Sacred Heart, Medford  
\_\_ St. Anne, Grants Pass  
\_\_ St. Paul, Eugene

**REGION II**

\_\_ Queen of Peace, Salem  
\_\_ St. James, McMinnville  
\_\_ Sacred Heart, Gervais  
\_\_ St. Joseph, Salem  
\_\_ St. Luke, Woodburn  
\_\_ St. Paul Parochial, St. Paul  
\_\_ St. Vincent de Paul, Salem  
\_\_ St. Mary's, Stayton

**REGION III**

\_\_ All Saints, Portland  
\_\_ St. Rose, Portland  
\_\_ Cathedral, Portland  
\_\_ Holy Cross, Portland  
\_\_ Holy Redeemer, Portland  
\_\_ Madeleine, Portland  
\_\_ St. Therese, Portland

**REGION IV**

\_\_ Christ the King, Milwaukie  
\_\_ Holy Family, Portland  
\_\_ Our Lady of the Lake, Lake Oswego  
\_\_ St. Agatha, Portland  
\_\_ St. Anthony, Tigard  
\_\_ St. Francis, Sherwood  
\_\_ St. Ignatius, Portland  
\_\_ St. John the Apostle, Oregon City  
\_\_ St. John the Baptist, Milwaukie

**REGION V**

\_\_ Holy Trinity, Beaverton  
\_\_ St. Cecilia, Beaverton  
\_\_ St. Clare, Portland  
\_\_ St. Francis of Assisi, Banks  
\_\_ St. John Fisher, Portland  
\_\_ St. Matthew, Hillsboro  
\_\_ St. Pius X, Portland  
\_\_ St. Thomas More, Portland  
\_\_ Visitation, Forest Grove

For Subbing at the High Schools, please contact the schools directly as they have their own process for substitutes.

The following elementary/middle schools also have their own process:

- St. Andrew Nativity
- Franciscan Montessori Earth School
- Valley Catholic Elem/Middle