



Our Lady of the Valley [OLV] Catholic School

1201 E. Bogard Rd., Wasilla, AK 99654 Phone (907) 376-0883

Website: olvwasilla.com Facebook: ourladyofthevalley-wasilla

Application for Full time Grades 7-8 middle school teacher

Date: _____ Email this form to klund@valleycatholicschool.org

1. GENERAL INFORMATION:

Name: _____
Last First Middle

Social Security # _____ E-Mail address: _____

Mailing Address: _____
Street City State ZIP

Home Telephone: _____ Mobile Phone: _____

Date available for employment: _____ Time of day you prefer to be contacted _____

Are you currently substitute teaching? Yes Where? _____ No

Please check Church affiliation Catholic Other: Denomination Name: _____

Current Church Name: _____ Current Church Name: _____

Location: _____ Location: _____

Pastor Name & phone: _____ Pastor Name & phone: _____

2. PERSONAL INFORMATION

1. Is there any reason you cannot perform the essential functions of the job for which you are applying? NO YES

2. Have you ever been convicted of a crime other than a minor traffic offense? NO YES

3. Explain any "yes" answer. _____
[2-3]

4. Do you have a legal right to work in the U. S. NO YES

3. EDUCATIONAL BACKGROUND & CERTIFICATE INFORMATION

	Name and Address of School	Dates Attended From/To	Degree/Diploma	Major	Minor
A. Grade School					
B. High School					
C. College or Training School					
D. Graduate Work					

E. Do you hold an Alaska Teaching Certificate? No Yes Certificate from another state? No Yes
Endorsement _____ Expiration Date _____ Endorsement _____ Expiration Date _____

[Elem., Sec., Adm. etc.]

mm/dd/yy

[Elem., Sec., Adm., etc]

mm/dd/yy



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4. NAME _____

5. Background, please check [x] and complete.

5a. Have you ever, for any reason, been suspended, dismissed or asked to resign a position? No Yes

5b. Have you ever had a teaching certificate denied, suspended or revoked? No Yes

5c. Have you ever been dismissed from any position for immoral or unprofessional conduct. No Yes

5d. Years of full time teaching experience, if applicable Elementary _____ Secondary _____

5e. If you haven't yet completed undergraduate studies, indicate pending date for receipt of your bachelor's degree? _____

5f. Have you ever been employed by the Archdiocese of Anchorage: Yes When/where? _____ No

6. WORK EXPERIENCE:

Dates Employed	Name of School, District, City & State, ZIP	Phone #	Assignment
6a.			
6b.			
6c.			
6d.			
6e.			

7. REFERENCES: Please note that telephone numbers must be listed on all references. Please list persons with whom you have worked within a professional setting. At least one must have been your direct supervisor

Name & Position	Address; city state zip	Phone	Position
7a.			
7b.			
7c.			
7d.			



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NAME: _____

8. PROFESSIONAL EXPERIENCE: Describe any professional experience that you feel have contributed to your preparation for teaching. Please complete this section **in your own handwriting**.

9. Why have you chosen Our Lady of the Valley Catholic School and what assets would you offer to OLV? [This section may be done digitally]

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10. CERTIFICATION

I HEREBY CERTIFY that all answers are true to the best of my knowledge and I agree to have any of the statements checked by Our Lady of the Valley Catholic School, (OLV) unless I have indicated to the contrary. Should a job offer be made, I understand my continuing employment, if hired, is contingent upon my being physically, mentally, and medically able, with or without reasonable accommodation, to successfully perform the essential functions of my job. I understand that this employment application contains nothing intended to lead or create any employment contract with OLV and may be terminated by either party at any time. I further understand and agree that the employment relationship that may result from my application will be employment-at-will, and either OLV or I may terminate the relationship at any time, with or without cause and/or with or without notice. I understand that any misrepresentation or falsification can be grounds for refusal of employment. I further understand that, if employed, any false statements or misrepresentations contained herein or in conjunction with the application process may be cause for dismissal.

Printed Name: _____ **Signature:** _____ **Date:** _____



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ARCHDIOCESAN CODE OF CONDUCT:

I will:

Treat everyone with respect, loyalty, patience, integrity, courtesy, dignity, and consideration. Avoid situations where I am alone with a minor at church and school activities Use positive reinforcement rather than criticism, competition, or comparison when working with minors. Refuse to accept expensive gifts from anyone I am ministering to or from their families without prior written approval from the pastor or administrator. Refrain from giving gifts to anyone. I am ministering to or to their families without prior written approval from the parents or guardian and the pastor or administrator. If a vulnerable person discloses information to me, as an Archdiocesan Personnel, I will follow the reporting guidelines set forth the in the Sexual Misconduct Policy of the Archdiocese of Anchorage. If I am a volunteer, I understand that I am not mandated to make the report and understand that the supervisor is expected to report this information about abuse. Cooperate fully in any investigation of abuse of minors,

INAPPROPRIATE Interactions:

- Crimes against persons
- Immoral conduct
- Actions disruptive to ministry and public worship
- Stealing or any form of theft, including misappropriation of church funds.
- Possession or distribution of pornographic material
- Adultery, promiscuity, or illicit behavior
- Engaging in sexual abuse, sexual misconduct or sexual harassment
- Failure to follow Archdiocesan policies

The following interactions are to be avoided to ensure respect and dignity is given to all people and to ensure a safe and secure faith environment. The following are examples of, but not limited to, inappropriate physical interactions

- Lengthy hugs or forceful frontal hugs
- Kisses on the mouth
- Holding toddlers or older children on the lap
- Touching buttocks or genital areas
- Being in bed with a minor
- Wrestling or tickling
- Any type of massage given by or to Church personnel

Examples of INAPPROPRIATE Verbal Interactions:

- Swearing, shaming or making comments relating to physique or body image or development
- Telling sexually suggestive or racial jokes or those which demean another

Examples of INAPPROPRIATE Behavior:

- Good judgment must be used when giving personal email, telephone number or residence location to a person to whom they minister especially with a minor or vulnerable adult
- Being alone with a minor or vulnerable adult in a private setting
- Allowing others to break rules or violate the law
- Offering alcohol to minors or marijuana or illegal drugs to anyone
- Being under the influence of alcohol or drugs in the presence of minors or those to whom you minister
- Showers with or in the immediate presence of a minor or vulnerable adult
- Exposing persons to sexually oriented or morally inappropriate material, especially minors or vulnerable adults
- Possession or distribution of pornographic material
- Adultery, promiscuity or illicit behavior
- Engaging in sexual abuse, sexual misconduct or sexual harassment
 - * Failure to follow Archdiocesan policies
- Transporting a minor or vulnerable adult alone, unless in an emergency and other ministers have been notified
- Giving special gifts or money to particular people you minister

ACKNOWLEDGEMENT Code of Conduct/Sexual Misconduct Policy

I understand that as a priest, deacon, pastoral administrator, staff or volunteer working with vulnerable adults, children and/or youth, I am subject to a thorough background check including criminal history. I also understand that any action inconsistent with this Code of Conduct or failure to take action mandated by this Code of Conduct may result in removal from ministry within the Archdiocese of Anchorage. I know too that I am responsible for reading and following the Sexual Misconduct Policy of the Archdiocese of Anchorage.

PRINTED NAME

DATE

SIGNATURE:

PARISH:



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APPENDIX OLV APPLICATION SPACE FOR ADDITIONAL INFORMATION

APPLICANT NAME _____ DATE: _____

The items in the previous portions of this application are numbered. If there is not enough space concerning your item[s], you may add information on this page. Please place the item # and name in the top line of the spaces below. You may attach your resume to this application if you wish.

Item #	Item topic:	

Item #	Item topic:	

Item #	Item topic:	