

**DIOCESE OF BAKER**  
**Department of Catholic Schools**

**SUBSTITUTE TEACHER APPLICATION**

If you wish to be considered for permanent or substitute teaching positions in the Diocese of Baker Schools, please fill in the information below. The Diocesan application form must be completed also. If you would like to be on our substitute list, please make sure to note all phone numbers where you can be reached.

**NAME** \_\_\_\_\_ **PHONE(s)** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY, STATE, ZIP** \_\_\_\_\_

**PERMANENT**

**SUBSTITUTE**

**OREGON STATE LICENSE:** Yes  No  In Process

If yes, indicate type: Basic  Standard  Initial  Continuing

License Number \_\_\_\_\_ Endorsements: \_\_\_\_\_

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

Do you have teaching experience?  **NO**  **YES**

If Yes, approximate number of years \_\_\_\_\_ (Regular) \_\_\_\_\_ (Substitute)

Grade levels taught: (Please circle) K 1 2 3 4 5 6 7 8 9-12

Grade level preference Pre-School - 12):

First Choice \_\_\_\_\_ Second Choice \_\_\_\_\_ Third Choice \_\_\_\_\_

What subjects would you prefer to teach? \_\_\_\_\_

*(Elementary teachers are normally listed as preferring a self-contained classroom, unless you specify otherwise.)*

**Please return this form with the Diocesan Application to your local Catholic School.**