

Mount Carmel School

Saipan, MP 96950 Tel: (670) 235-1251 Fax No. (670) 235-4751 Email: mtcarmel@pticom.com www.mtcarmel-edu.net

Please read carefully and complete by printing in ink or typing. Provide all information requested.

Your complete application form will be maintained in our active files for six (6) months from the date of application. You may submit a new application at any time.

Name:	Last		First		Middle	
Present Address:	P.O. Box/Street		City	State	Zip Code	Telephone
						Email
Permanent Address:	P.O. Box/Street		City	State	Zip Code	Telephone
						Email
Religious Education	n Certification: (Give	e date issued for highes	t Level)		Social S	ecurity Number
None	Basic	Intermediate	Advanced	Note Sure		
Religion	Parish		Address:			
Position Desired:				Assignment Prefere	ence:	
Elementa		Middle	_High School			
How were you referred to Mount Carmel School? (Check one.)						
A. By your college	B. by your parish	C. Employment agency	D. By an employee	. If so give name	E. By a religious org	ganization. if so give name

EDUCATIONAL HISTORY

Please attach official transcripts and certificates

INSTITUTION AND LOCATION	FROM Mo./Yr.	TO Mo./Yr.	DEGREE Degree Date	MAJOR FIELD	MINOR FIELD
High School					
Technical/trade (after high school)					
College or University					
College or University					
Graduate Work					
Other education/training					



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CERTIFICATE/LICENSE HELD

Please attach a copy of your certificate/license

STAT	SUBJECT/AREA			DATE ISSUED	DATE EXPIRED			
	EMPLOYMENT RECORD							
Starting	with p	oresent or most recent, list all previous employers. In heet. You may attach a resume, but complete this a	ncluding self-empl	loyment and summer and part-time jobs.	If more space is required please continue			
_		Experience	application as well.	•				
Teach	ing E	zaperience	T					
From	То	School/Company and Address	Duties	or Subject/Grade Taught	Principal/Supervisor's Name			
Work	Ехре	erience (Any position held outside the educational	l field)					
From	То	Company and Address		Position/Duties	Supervisor's Name			
LIST MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS								
	PRESENT PERSONAL EDUCATIONAL PURSUITS (Working for degree, workshops, etc. attended within last 3 years)							



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PRINCIPAL HOBBIES www.mtcarmel-edu.net				
WRITE A BRIEF STA	TEMENT (100 WORDS) STAT	ING YOUR STRENGTHS AND	WEAKNESSES AS THEY PERTAIN	
TO THE POSITION S		210 2002 5112 1012		
	EMPLO	YMENT INFORMATION		
	been convicted of a crime regarding ployee of Mount Carmel School?		ay be substantially related to your job e explain on a separate sheet of paper.	
	ny reason been suspended, dismiss parate sheet of paper.	ed or asked to resign a position?	Yes:No: If yes, please	
	e ability to perform the job applied on a separate sheet of paper.	I for with or without reasonable acco	ommodations? Yes:No: If no,	
		SSIONAL REFERENCE		
Name	Occupation Occupation	demic or Professional References: Address	Telephone (include area code)	
			Email:	
Name	Occupation	Address	Telephone (include area code)	
			Email:	
Name	Occupation	Address	Telephone (include area code)	
			Email:	
Date Available for Employment	Present Salary	Salary Expected	Are you Under Contract?	
May we contact your pro	esent employer? Yes: No:	If no, please explain on a separ	rate sheet of paper	



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IF APPLYING FOR A <u>TEACHING POSITION</u> PLEASE COMMENT ON THE FOLLOWING QUESTIONS

If more space is needed, attach additional page(s)

1.	Briefly explain your philosophy of education.
2.	Why are you choosing to teach in a Catholic school?
3.	Describe a success you've had in education.
4.	Are you willing to lead and to participate in Eucharistic liturgies, prayer services, and classroom prayer? Yes: No: If no, please explain. How do you envision leading students in prayer?



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IF APPLYING FOR AN <u>ADMINISTRATIVE POSITION</u> PLEASE COMMENT ON THE FOLLOWING QUESTIONS If more space is needed, attach additional page(s)

1.	How are you qualified to accept a leadership role in Catholic education? Describe any aspect of your training or experience, which would be an asset for the position you have requested.
2.	Please indicate your background in religious education. How does this contribute to your work as an administrator?
3.	Why are you choosing to work in a Catholic school?
٥.	why are you choosing to work in a Cathone school:
4.	Briefly explain your philosophy of education.



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5.	How important do you consider you own Christian attitudes and practices in your role as an administrator?
6.	How would you, as an administrator, assure that Christian values permeate the curriculum?
7.	How should decisions be made in a school setting?



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IF APPLYING FOR A NON-TEACHING POSITION PLEASE COMPLETE THE FOLLOWING

If more space is needed, attach additional page(s)

1	Why are	you choosing	to work in a	Catholic	school?
١.	willy are	you choosing	to work ill a	Camone	SCHOOL!

Special Skills If more space is needed, attach additional page(s)

To be completed by applicant for office/clerical work	To be completed by applicant for shop/plant	t work
Computer Skills Hardware	Types of machines operated	Years of experience
Software		
List other skills and/or equipment/language experience you have acquired	List other shop/production skills	



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TRANSCRIPTS

Please have a copy of your transcripts and credentials from high school, technical/trade school, colleges or universities sent to us a soon as possible.

DECLARATION OF VERACITY

I hereby certify that the answers and other information on this application are true and correct and that I understand any misrepresentation or omission of facts on my part will be justification for separation from the company's service, if employed I understand that my employment may be contingent upon receipt of an alien registration number, verification of birth, and any other pertinent information bearing upon my employment, and that my continued employment depends upon the will of the company or myself.

I understand that, consistent with Commonwealth regulations, I may be required to submit to, or provide evidence of tuberculin testing and/or chest X-rays, and be declared free of such disease by qualified medical personnel. I further consent to a drug screening, if requested, during the course of my employment.

I understand that an investigation may be made of my employment, and personal history to arrive at an employment decision. I hereby release from all liability or responsibility, all persons, schools, companies furnishing such information. I understand that only job-related information will be used in the evaluation of my qualification of any position for which I am considered.

I understand and agree that if hired, Mount Carmel School shall have the right during my time of employment or after my termination of service, to furnish information to other prospective employers regarding my employment including information contained in this application.

If any of your educational or employment records are und	der other than the above name, please provide other names.
Date	Signature

An Equal Opportunity Employer

We are an equal opportunity employer, and we do not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital status, or status as a disabled veteran. Information provided on this application will no be used for any discriminatory purpose.