



***St. Pius Elementary School***  
***205 East Bayou Parkway, Lafayette, LA 70508***

**CERTIFIED SUBSTITUTE PERSONNEL EMPLOYMENT**  
**Application Instructions**

1. Print and complete the Application for Employment included in this packet.
2. Submit your completed application with the following items:
  - \_\_\_ Transcript (Official will be needed if hired.)
  - \_\_\_ Teaching Certificate
  - \_\_\_ NTE or PRAXIS Scores
  - \_\_\_ Resume
  - \_\_\_ Safe Environment - latest certification info (if applicable)

(NOTE: Applications are only considered complete if ALL items listed above are submitted.)

3. Mail or deliver your completed application packet to:

*St. Pius Elementary School*  
*Attention: Kellie DesOrmeaux*  
*205 East Bayou Parkway*  
*Lafayette, La. 70508*

4. Questions about this application may be addressed to SPES Principal, Kellie DesOrmeaux via e-mail at [kellie\\_desormeaux@stpiuselementary.org](mailto:kellie_desormeaux@stpiuselementary.org).

Thank you for your interest in St. Pius Elementary School.

*In Christ,*  
*Kellie DesOrmeaux*  
*Principal*



*St. Pius Elementary School*

APPLICATION FOR EMPLOYMENT

**Certified Substitute**

Date of Application: \_\_\_\_\_

Date available for employment: \_\_\_\_\_

Position(s) for which you are applying: \_\_\_\_\_

**Please Print:**

Full Name: \_\_\_\_\_  
Last First Middle/Maiden

Address: \_\_\_\_\_ Email: \_\_\_\_\_  
Street City/State/Zip

Cell Phone: (\_\_\_\_) \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ Religion: \_\_\_\_\_

**Educational Background and Experience:**

Degree Earned \_\_\_\_\_ College Granting \_\_\_\_\_ Year \_\_\_\_\_

Major Area of Study \_\_\_\_\_ Minor Area of Study \_\_\_\_\_

Additional Degree \_\_\_\_\_ College Granting \_\_\_\_\_ Year \_\_\_\_\_

Major Area of Study \_\_\_\_\_ Minor Area of Study \_\_\_\_\_

Louisiana Teaching Certificate Type/No. \_\_\_\_\_ Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Certified to Teach( Check all that apply): Early Childhood \_\_\_\_\_ Kindergarten \_\_\_\_\_

Elementary Grades \_\_\_\_\_ Secondary Subjects \_\_\_\_\_ Special Education \_\_\_\_\_

Do you hold a Certificate from another state: YES NO Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

State: \_\_\_\_\_

**No. of Yrs. Teaching Experience:** \_\_\_\_\_

**Previous Teaching Experience:**

School/Location \_\_\_\_\_ Grade/Subject: \_\_\_\_\_ Dates \_\_\_\_\_

School/Location \_\_\_\_\_ Grade/Subject: \_\_\_\_\_ Dates: \_\_\_\_\_

School/Location \_\_\_\_\_ Grade/Subject: \_\_\_\_\_ Dates: \_\_\_\_\_

List memberships in professional or business organizations: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**References:** List four (4) Personal References (neither relatives nor former employers) and include the requested contact information:

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◇ Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship To Applicant: \_\_\_\_\_

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◇ Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship To Applicant: \_\_\_\_\_

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◇ Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship To Applicant: \_\_\_\_\_

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◇ Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship To Applicant: \_\_\_\_\_

**List three (3) Professional References** (must include last two Principals, if applicable) and include the requested contact information:

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◇ Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship To Applicant: \_\_\_\_\_

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◇ Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship To Applicant: \_\_\_\_\_

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◇ Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship To Applicant: \_\_\_\_\_

**Safe Environment Certification:** I have \_\_\_\_\_ have not \_\_\_\_\_ attended the Diocesan requirement for two (2) hours initial education and training for "A Safe Environment for the Protection of Children and Young People." If you have met the requirements, **please provide a copy of Safe Environment certificate** issued by the Diocese. Location of Initial Training: \_\_\_\_\_

**Most Recent Volunteer Experience :**

Organization: \_\_\_\_\_ Organization Address: \_\_\_\_\_

Organization Phone Number: \_\_\_\_\_ Volunteer Coordinator: \_\_\_\_\_

Date(s) of most recent volunteerism: \_\_\_\_\_

Volunteer Duties/Activity: \_\_\_\_\_

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**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

## PROFESSIONAL CONDUCT

(An answer is required to each question.)

Answer each of the following questions by circling "YES" or "NO"  
and providing additional information as requested

1. Have you ever had any professional license or certificate denied, suspended, revoked, or voluntarily surrendered? 1. YES NO  
A. If YES, in what state? \_\_\_\_\_
2. Are you currently being reviewed or investigated for purposes of such action as stated in Question #1 or is such action pending? 2. YES NO  
A. If YES, in what state? \_\_\_\_\_
3. Have you ever been convicted of any felony offense, been found guilty or entered a plea of *nolo contendere* (no contest), even if adjudication was withheld? 3. YES NO
4. Have you ever been convicted of a misdemeanor offense that involves any of the following:  
A. Sexual or physical abuse of a minor child or other illegal conduct with a minor child? 4A. YES NO  
B. The possession, use, or distribution of any illegal drug as defined by Louisiana or federal law? 4B. YES NO
5. Have you ever been granted a pardon for either/both of the offenses listed in Questions #3 or #4? 5. YES NO

If you answered "YES" to any of the questions (#1-#5 above) **court -certified** copies of all documents and proceedings, civil records of State and/or District School Board actions and/or other relevant documentation that provide full disclosure of the nature and circumstances of **EACH** separate incident listed above must be submitted with your completed application.

***I affirm and declare that all information given by me in the responses to items #1 through #5 above is true, correct and complete to the best of my knowledge. I understand that any misrepresentation of facts, by omission or addition, may result in criminal prosecution and/or the denial or revocation of my teacher certification.***

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***St. Pius Elementary School does not discriminate on the basis of race, gender or national origin in its educational programs, activities or employment policies.***