



MARIAN

APPLICATION FOR SUBSTITUTE TEACHING

NAME _____

ADDRESS _____

PHONE _____ EMAIL _____

SOCIAL SECURITY NUMBER _____

AREAS CERTIFIED _____

TEACHING EXPERIENCE _____

REFERENCE _____

Name

Phone #

Address

Zip Code

Have you had a background check? _____

Have you had the Omaha Archdiocese Safe Environment Training? _____

If not, you will need to have the training.

Have you ever been convicted of a felony within the past seven years? _____

If so, please explain. (Note: An affirmative answer to this question will not necessarily disqualify you from employment.) _____

Signature

Date

Please send a copy of Nebraska Teaching Certificate to:

Jen Christen

Marian High School

7400 Military Avenue

Omaha, NE 68134

MARIAN

7400 MILITARY AVENUE

OMAHA, NE 68134

P: 402.571.2618

F: 402.571.1952

marianhighschool.net