



**TEACHING ASSISTANT APPLICATION
AND INFORMATION
ST. MARY'S EPISCOPAL SCHOOL**

Date of Application: _____

Name: _____

Address: _____
Street City State & Zip

Home Phone: _____ Cell: _____

Religious Affiliation (optional): _____

EDUCATION

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Name of school or institution	Major(s)/Degree	Date of Graduation
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High School: _____

College/University: _____

Graduatework: _____

St. Mary's is open to any qualified teacher regardless of race, color, national origin, sex or age.

WORK EXPERIENCE (Please include your most recent jobs)

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Name of school or business	Location	Position	Date left
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I am unable to work on the following days/times:

Signature and Date: _____

Please attach copy of past teaching certificate (if available) and resume