



ARCHDIOCESE OF MOBILE  
DEPARTMENT OF CATHOLIC EDUCATION

Dear Applicant,

Thank you for your interest in the position of Executive Director for Catholic Education/Superintendent.

Please submit the enclosed documents:

- Application for Employment
- Archdiocese of Mobile Screening form
- Applicant/Volunteer Release statement
- Lifestyle Expectations form
- Applicant Marital Status form
- Verification of Administrative Experience form
- Verification of Teaching Experience form

To complete the application process, the following must also be on file with the Department of Catholic Education:

- A cover letter
- A resume
- A letter of reference from your pastor
- Three professional reference letters
- University/College transcripts

Submit all documents to: Archdiocese of Mobile  
400 Government Street  
Mobile, AL 36602  
Attention: Vicar General

or: Email: [vicargeneral@mobarch.org](mailto:vicargeneral@mobarch.org)

When all the required forms are received, your name will be placed on the active list of applicants.

If you have any questions, please call 251.434.1585



# ARCHDIOCESE OF MOBILE

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## DEPARTMENT OF CATHOLIC EDUCATION

### **Position: Executive Director of Catholic Education/Superintendent**

**Reports to:** Archbishop

**FSLA Status:** Exempt

**Major Objective:** The Executive Director of Education works directly with the Archbishop and other archdiocesan executives in the planning and supporting of policies and regulations, vision and leadership in the Archdiocese. The Director will be responsible for the ongoing development and support of ministries within the Department of Catholic Education: Office for Evangelization and Family Life, Office of Youth and Young Adult Ministry, and the Office of Catholic Schools. The Director also serves as the Superintendent of Catholic Schools for the Archdiocese. As Superintendent, the Executive Director leads the Catholic Schools Office in providing leadership, support and oversight of the Catholic Schools in the Archdiocese.

### **Responsibilities:**

- Serves as the liaison between the Archbishop and offices within the Department of Catholic Education
- Recognizes and supports the unique Catholic mission of the Archdiocese of Mobile by creating an environment in which strong Catholic identity is expected and demonstrated
- Serves as the face of Catholic education through communication with Catholic and civic communities
- Fosters positive collaboration between the Office for Evangelization and Family Life, Office of Youth and Young Adult Ministry, and the Office of Catholic Schools in order to promote Archdiocesan and parochial endeavors
- Serves as a resource to Pastors who have schools in their parishes
- Actively leads Catholic schools in maintaining Catholic identity, high standards for academics, and growth
- Supports school administrators in their role as spiritual, academic and managerial leaders in their schools
- Stays current with educational research by attending local, regional and national meetings and workshops
- Identifies office staffing needs and develops appropriate job descriptions to fulfill those needs
- Recruits and hires qualified, dedicated staff; once hired, supervises and evaluates regularly
- Develops annual budget for the Department of Catholic Education
- Meets regularly with Department heads and principals for planning purposes

### **Qualifications and Skills:**

- Practicing Roman Catholic who is able to articulate the mission of the Catholic Church
- Master's Degree in Education or related field
- School administration and teaching experience
- Strong leadership and management skills
- Excellent communication and fiscal management skills
- Able to travel within all areas of the Archdiocese



# Archdiocese of Mobile Application for Employment

Parish/School/Entity \_\_\_\_\_ City \_\_\_\_\_

This form must be attached to the Archdiocesan Screening Form to complete Employment Application. This application will remain available for a period of one year after it is submitted. Any applicant who wishes to be considered for a position after that time period should submit another application.

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Daytime Phone (\_\_\_\_\_) \_\_\_\_\_ Other Phone (\_\_\_\_\_) \_\_\_\_\_

Are you a United States citizen or alien legally authorized to work in the United States? Yes  No

Emergency Contact Person \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

### EMPLOYMENT DESIRED

Position \_\_\_\_\_ Date you can start \_\_\_\_\_ Salary Desired \_\_\_\_\_

Are you under contract now? Yes  No  Full Time  Part Time

Have you previously been employed by Archdiocese of Mobile? Yes  No

If yes, what position? \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Have you applied to this diocese before? Yes  No  Where? \_\_\_\_\_ When? \_\_\_\_\_

Who referred you to this location? \_\_\_\_\_

### EDUCATION

School Level	Name and Location of School	No. of yrs. attended?	Did you graduate?	Subjects studied	Degree Received
Grammar School					
High School					
College					
Postgraduate School					
Trade, Business or Correspondence School					
Other Training					

Do you hold teaching certification or professional certification?      Yes       No

Teacher certification, rank and specialty or other endorsements \_\_\_\_\_

Other certification(s): List certificate, date of certification and certifying agency

\_\_\_\_\_

List any skills, talents, education, training or experience, other than that listed above, which qualifies you for the position you are seeking: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List three personal references you have known three years or more (not former employers).

1. Name \_\_\_\_\_

Address \_\_\_\_\_ Phone (H) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (W) \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_ Phone (H) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (W) \_\_\_\_\_

3. Name \_\_\_\_\_

Address \_\_\_\_\_ Phone (H) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (W) \_\_\_\_\_

**GENERAL**

Subjects of special study or research work

\_\_\_\_\_

\_\_\_\_\_

Special training

\_\_\_\_\_

Special skills

\_\_\_\_\_

\_\_\_\_\_

**FORMER EMPLOYERS** (List below three employers, starting with last one first).

**1. Current employer.** Name: \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_

Starting date \_\_\_\_\_ Ending date \_\_\_\_\_ Part Time  Full Time

Month Year Month Year

Weekly starting salary \_\_\_\_\_ Weekly final salary \_\_\_\_\_

Job title \_\_\_\_\_ May we contact your supervisor? \_\_\_\_\_

Name and title of supervisor \_\_\_\_\_ Supervisor's email address \_\_\_\_\_

Description of work \_\_\_\_\_

Reason for leaving \_\_\_\_\_

**2. Name and address of employer prior to 1.** Name: \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Starting date \_\_\_\_\_ Ending date \_\_\_\_\_ Part Time  Full Time

Month Year Month Year

Weekly starting salary \_\_\_\_\_ Weekly final salary \_\_\_\_\_

Job title \_\_\_\_\_ May we contact your supervisor? \_\_\_\_\_

Name and title of supervisor \_\_\_\_\_ Supervisor's email address \_\_\_\_\_

Description of work \_\_\_\_\_

Reason for leaving \_\_\_\_\_

**3. Name and address of employer prior to 2.** Name: \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Starting date \_\_\_\_\_ Ending date \_\_\_\_\_ Part Time  Full Time

Month Year Month Year

Weekly starting salary \_\_\_\_\_ Weekly final salary \_\_\_\_\_

Job title \_\_\_\_\_ May we contact your supervisor? \_\_\_\_\_

Name and title of supervisor \_\_\_\_\_ Supervisor's email address \_\_\_\_\_

Description of work \_\_\_\_\_

Reason for leaving \_\_\_\_\_

**Attach a copy of your resume.** If no resume, initial here \_\_\_\_\_

**Attach a photo (optional).** If no photo, initial here \_\_\_\_\_

STATEMENT OF NONDISCRIMINATION: The Archdiocese of Mobile is committed to providing equal employment opportunities for all persons regardless of race, color, gender, age, national origin, citizenship status, disability, or status as a disabled veteran of the Vietnam era.

Any offer of employment is subject to the successful completion of a criminal background and reference check.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



# Archdiocese of Mobile Screening Form

## Check One

Religious  Volunteer  Employee  Job Applicant

Parish/School/Entity \_\_\_\_\_ City \_\_\_\_\_

This Screening Form is to be completed by all applicants for any position (volunteer or compensated). This is not an employment application. Persons seeking employment will be required to provide additional information. This process is used to help the Church provide a safe and secure environment for children, youth and adults who participate in our programs and use our facilities.  
**You may not volunteer or work with youth in any Archdiocesan ministry until your background check has been completed and approved.**

\*Legal Name \_\_\_\_\_

Last

First

Middle

Maiden

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

City

State

Zip

Other names used within the last 7 years: \_\_\_\_\_

\*Social Security Number (please indicated **none** if you do not have a SSN): \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

City

State

Country

Green Card/Student Visa Number: \_\_\_\_\_ Driver's License: \_\_\_\_\_

Number

State

Daytime Phone (\_\_\_\_\_) \_\_\_\_\_ Other Phone (\_\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

Employer \_\_\_\_\_

List one personal reference you have known three years or more.

Name \_\_\_\_\_

Address \_\_\_\_\_

Daytime Phone (\_\_\_\_\_) \_\_\_\_\_ Other Phone (\_\_\_\_\_) \_\_\_\_\_

Are you a registered member of the parish? Yes  Since \_\_\_\_\_ No

List all other churches you have attended or been involved with during the last five years:

Church

County

State

From

To

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

**\*Information must be provided in order to complete the required background check.**

Name \_\_\_\_\_

In what ministry/ies will you be working/volunteering?

<b>School</b>	<input type="checkbox"/> Parent	<input type="checkbox"/> Grandparent	<input type="checkbox"/> Employee	<input type="checkbox"/> Other _____
<b>Parish</b>	<input type="checkbox"/> Religious Ed	<input type="checkbox"/> VBS	<input type="checkbox"/> Employee	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Youth Ministry	<input type="checkbox"/> Scouts	<input type="checkbox"/> CYO Coach	
<b>Religious</b>	<input type="checkbox"/> Priest	<input type="checkbox"/> Deacon	<input type="checkbox"/> Seminarian	<input type="checkbox"/> Religious Sister
<b>Other</b>	<input type="checkbox"/> Volunteer	<input type="checkbox"/> Employee	<input type="checkbox"/> Other _____	Entity _____

**IMPORTANT: PLEASE READ EACH QUESTION BEFORE ANSWERING**

1. Has a civil or criminal complaint ever been filed against you alleging sexual misconduct or child abuse by you or your participation in or facilitation of such activities (including internal complaints given to management or supervisors at places of employment)? Yes  No

If yes, explain in full (attach a separate sheet of paper if necessary). Please provide the date, nature and place of the incident leading to the complaint; where the complaint was filed; disposition of the complaint; and identify, by name and title, the person(s) who investigated the complaint.

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2. Have you ever chosen not to renew or continue any employment or volunteer services, had your employment or volunteer services terminated or been subject to disciplinary action, **for reasons relating to allegations of sexual misconduct or child abuse by you?** Yes  No

If yes, please explain (attach a separate sheet of paper if necessary). Please include in your explanation the date, nature and place of the occurrence(s), allegation(s) and the disposition of the matter(s). Also, identify your employer and supervisor at the time by name, address and telephone number.

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3. Have you ever been arrested or convicted of a crime (felony or misdemeanor) other than a minor traffic violation? Yes  No

If yes, please explain (attach a separate sheet of paper if necessary). Please include in your explanation the date and place of any conviction, and the crime for which you were convicted.

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4. Are you presently abusing alcohol or using any illegal drugs? Yes  No



# Archdiocese of Mobile Acknowledgement

*Acknowledgement of Receipt and Review of the Archdiocese of Mobile Child Protection Policy*

This is to acknowledge the Archdiocese of Mobile Child Protection Policy is available to me for my review on the Archdiocesan website.

I understand that I am responsible for complying with the Policy as stated and, if I am an employee or volunteer, that questions or clarifications regarding the Policy should be directed to my immediate supervisor or to the Archdiocesan Office of Administration. If I am a priest, deacon, religious, or seminarian, I understand that questions should be referred to the Archbishop or his designee.

I further understand that the Archdiocese of Mobile reserves the right to change, modify and/or revise any part of the Policy at any time.

Signature: \_\_\_\_\_

Name (please print): \_\_\_\_\_

Parish/School/Agency: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_





# Applicant/Volunteer Release Statement

*IMPORTANT: THE FOLLOWING STATEMENT MUST BE READ AND SIGNED.*

- The information provided in this Application is true, correct, and complete. If employed or accepted as a volunteer, any misstatement or omission of fact on this Application may result in my dismissal.
- I grant permission to the Archdiocese of Mobile to conduct a pre-employment or pre-volunteer screening of my background and references and release the Archdiocese of Mobile and Archdiocesan schools, parishes, organizations, agencies, ministries, and other entities if applicable, from any and all resultant liability. This screening may include, but is not limited to, background investigations, criminal history checks, consumer reports, investigative consumer reports, and other reports which may bear upon an applicant or a volunteer's fitness for a position. I understand and authorize any references, or any other person or organization, whether or not identified in this Application, to give any information (including opinions) regarding my character and fitness for service. I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative consumer report prepared on me upon my written request to the entity preparing the report, when the request is made within a reasonable time after the date thereof.
- I grant permission to the Archdiocese of Mobile to release this Application and attendant documents to the appropriate department, agency, search/committee and prospective supervisor within the Archdiocese of Mobile. I understand my signature absolves and releases the Archdiocese of Mobile from any and all liability for any and all legal action involving relinquishment of the information to others.
- I hereby release any reference contact, whether identified or not in this Application, and waive any and all claims and liability for damages of whatever kind or nature which may at any time result to me, my heirs/family, on account of compliance with this authorization, excepting only the communication of knowingly false information.
- I will abide by the policies and procedures of the Archdiocese of Mobile.
- If employed, I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.
- I will be required to furnish proof of identity and eligibility to work in the U.S. once a conditional job offer has been made.
- I am aware that background checks may be updated periodically.
- Upon termination, I authorize the release of reference information by the Archdiocese of Mobile.
- I intend this to be a legally binding Release, which I have read and understand. I understand that I may consult with an attorney before signing the document. A facsimile or photocopy of this authorization shall be as valid as the original.
- I HAVE CAREFULLY READ THIS RELEASE AND KNOW THE CONTENTS. I SIGN THIS RELEASE AS MY OWN FREE ACT.

Name \_\_\_\_\_ (Printed)

Signature \_\_\_\_\_ Date \_\_\_\_\_

### **Lifestyle Expectations Based Upon Catholic Beliefs**

It is our faith that life is a gift from God which we are called to respect from conception to natural death. We believe that God creates people in his own image as male and female. He has instituted marriage as a life long covenant relationship between one man and one woman and calls husbands and wives to exclusive sexual fidelity. We believe that sexual relations outside of marriage are inconsistent with God's call to holiness in our lives. We believe that anything that separates the conjugal act from procreation (for example, in vitro fertilization) is inconsistent with the dignity of human sexuality. We further believe that pornographic material undermines the dignity and image of God in individuals and promotes sexual conduct contrary to our Catholic beliefs.

We require all who serve in the Archdiocese of Mobile to live in accord with our beliefs regarding human life, sexuality and marriage. Some may not affirm their agreement with our beliefs regarding human life, sexuality and marriage, and they are not required to affirm our beliefs if contrary to their own conscience, but all who serve in the Archdiocese of Mobile are required to live in accord with our beliefs regarding human life, sexuality and marriage and to do nothing to undermine, subvert or contradict our beliefs.

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*(applicant's signature)*

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*(date)*

## Applicant Marital Status Form

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

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

Email: \_\_\_\_\_

Telephone number: (\_\_\_\_) \_\_\_\_\_

**My religious affiliation:** \_\_\_\_\_ Baptized Catholic  
\_\_\_\_\_ Other (Please specify) \_\_\_\_\_

**I am married.** \_\_\_\_\_ Yes \_\_\_\_\_ No

*If married:* My spouse's religious affiliation: \_\_\_\_\_ Baptized Catholic  
\_\_\_\_\_ Other (Please specify)

Location of wedding: \_\_\_\_\_ City of wedding: \_\_\_\_\_

**I have been married before.** \_\_\_\_\_ Yes \_\_\_\_\_ No

*If yes:* Former spouse's religious affiliation: \_\_\_\_\_ Baptized Catholic  
\_\_\_\_\_ Other (Please specify)

Location of wedding: \_\_\_\_\_ City of wedding: \_\_\_\_\_

Was this marriage annulled? \_\_\_\_\_ Yes \_\_\_\_\_ No

**My current spouse has been married before.** \_\_\_\_\_ Yes \_\_\_\_\_ No

*If yes:* Religious affiliation of spouse's former spouse: \_\_\_\_\_ Baptized Catholic  
\_\_\_\_\_ Other (Please specify)

Location of wedding: \_\_\_\_\_ City of wedding: \_\_\_\_\_

Was this marriage annulled? \_\_\_\_\_ Yes \_\_\_\_\_ No

**VERIFICATION OF ADMINISTRATIVE EXPERIENCE**

This is to certify that \_\_\_\_\_ was employed as a regular full-time Administrator at \_\_\_\_\_ School, as indicated below.

Name of School \_\_\_\_\_

School Address \_\_\_\_\_  
 \_\_\_\_\_

Telephone Number of School \_\_\_\_\_

Type of School: Include only full-time administration for which salary was paid. Use separate lines for each school term.

From: Month/Year	To: Month/Year	Full Semester(s)		Type of School PK-8 / K-6 / 9-12
		Yes	No	

Name(s) of Superintendent(s) during the period indicated above:  
 \_\_\_\_\_

Kind of administration certificate applicant held during period of employment:  
 \_\_\_\_\_

Was the school accredited during applicant's employment?      Yes      No

Remarks:

Date: \_\_\_\_\_

\_\_\_\_\_  
 Signature of Superintendent or Administrator

(This form when completed is to be filed with the applicant's cumulative personnel record.)

## VERIFICATION OF TEACHING EXPERIENCE

This is to certify that \_\_\_\_\_ was employed as a regular full-time teacher at \_\_\_\_\_ School, as indicated below.

Name of School \_\_\_\_\_

School Address \_\_\_\_\_

(Street Address) (City) (State) (Zip Code)

Telephone Number of School \_\_\_\_\_

Subjects or Grade Taught: Include only full-time teaching for which salary was paid. Use separate lines for each school term

From: Month/Year	To: Month/Year	Full Semester(s)		Subject/Grade Taught
		Yes	No	

Name(s) of Administrator(s) during the period indicated above:

\_\_\_\_\_

Kind of teaching certificate applicant held during period of employment:

\_\_\_\_\_

Was the school accredited during applicant's employment? Yes No

Remarks:

Date: \_\_\_\_\_

Signature of Superintendent or Administrator