



Department of Catholic Schools
Archdiocese of San Antonio
2718 W. Woodlawn Ave
San Antonio, Texas 78228
(210) 734-2620 • Fax (210) 734-9112
www.sacatholicschools.org

APPLICATION 2019/2020 School Year

We seek support and participation from those who share a common vision, mission and philosophy in Catholic schools.

*We are interested in considering you to share in the governance of **St. James Catholic School**.
Based on your experience and expertise select which organization you may want to serve.*

Thank you for considering to SERVE!

*Please **Print** or **Type**:*

Date: _____

Organization for which you are applying based on experience and expertise:

___ Catholic School Council

___ Parent-Teacher Club

Name:

Address: _____ **City** _____ **State** _____ **Zip** _____

Home Phone: _____ **Email:** _____

Religion: _____ **Parish Registered (Name/City):** _____

PLACE OF EMPLOYMENT:

Company Name:

Address: _____ **City** _____ **State** _____ **Zip** _____

Work Phone: _____ **Occupation:** _____

EDUCATION:

High School	City	State	
College(s) Attended	City	State	Degree Earned

ASSOCIATION WITH CATHOLIC PARISH:

Dates	Activities	Capacity

CATHOLIC SCHOOL COUNCIL/PTC EXPERIENCE:

School Council/PTC	Activities	Dates/Years

COMMUNITY ACTIVITIES:

Dates	Activities	Capacity

SCHOOL ACTIVITIES INVOLVEMENT:

School	Activities	Dates/Year

REFERENCES: (Please provide the name, address, & phone number for 3 references.)

1. _____
2. _____
3. _____

Please indicate what expertise you can bring to the Catholic School Council/Parent-Teacher Club.

Signature

Date

Return your application to:

**Johanna Lopez
St. James Catholic School
507 S. Camp St.
Seguin, TX 78155**