

UNIFIED SCHOOL DISTRICT 352

Goodland, Kansas

**Substitute Teacher Application**

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

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

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

City and State: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**EDUCATION:** *Official Transcripts are required. Please list educational institutions attended below:*

<u>Name of College</u>	<u>Location of College</u>	<u>Hours Earned/Degree Received</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Certificate Held** (circle one): Emergency Regular Certificate Emergency Certificate  
*(certified teachers)* *(non-certified - min. 60 hrs required)*

**Grade levels preferred** (circle one group or all): K-6 7-8 9-12 Music PE

**Days your schedule will allow you to substitute** (circle): Mon Tue Wed Thur Fri

**Time of the year your schedule will allow you to substitute** (circle choice):

Current school year or

During the following dates: \_\_\_\_\_

**If you substitute at the High School and/or Junior High** (circle subjects):

Social Science	Science	Home Economics	E.M.H.	L.D.	English
Math	Business	Industrial Arts	Drama	Vocal Music	Instrumental Music
				PE	Foreign Language

**PERSONAL REFERENCES**

Please list two people, not related to you, who would have knowledge of your qualifications.

<b>NAME &amp; OCCUPATION</b>	<b>ADDRESS</b>	<b>TELEPHONE</b>
_____	_____	_____
_____	_____	_____

**WORK EXPERIENCE**

Start with most recent position and list employment in consecutive order. Account for all periods of time including military service and any period of unemployment. If self-employed, give name of business and supply business references. (Attach separate sheet if more room is needed.) Please feel free to attach a resume if you wish to do so.

<b>DATES FROM-TO</b>	<b>NUMBER OF YEARS</b>	<b>NAME &amp; ADDRESS OF EMPLOYMENT</b>	<b>SUPERVISOR'S NAME</b>	<b>JOB TITLE</b>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**PERSONAL DATA**

Have you ever been discharged or forced to resign from any job? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why are you seeking to change positions or why did you leave your last position? \_\_\_\_\_  
\_\_\_\_\_

Are you aware of any reason you would not be able to perform the duties required of the position for which you are applying? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

Moral turpitude is an act of baseness, vileness or depravity to the private and social duties which a person owes another member of society or society in general and which is contrary to the accepted rule of right and duty between persons, including, but not limited to theft, attempted theft, murder, rape, swindling and indecency with a minor. Have you ever been convicted of or pled guilty or nolo contendere to a felony or any offense involving moral turpitude? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain \_\_\_\_\_

Conviction of a crime is not an automatic bar to employment. The District will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.

1. I certify that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire or, if I am hired and the same is discovered thereafter, termination.

2. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.

3. I authorize you to request, receive, and verify all information given on this application, and I release you from all damages that may result from your doing so.

4. I authorize you to conduct a criminal background investigation using any and all methods necessary to successfully complete such investigation, and I release you from all liability for any damages that may result from your doing so.

\_\_\_\_\_  
Date

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

**NONDISCRIMINATION STATEMENT**

Unified School District 352 Sherman County does not discriminate on the basis of race, color, national origin, sex, age, disability, political affiliation, religion, or belief in relation to admission, treatment of students, access to programs and activities, or terms and conditions of employment. Any person who feels that discriminatory conditions exist concerning Title VI, Title IX or Section 504 of the Rehabilitation Act of 1973 may contact Superintendent of Schools, Unified School District 352 Sherman County, P. O. Box 509, Goodland, Kansas 67735 (785) 899-2397.