



SUBSTITUTE TEACHER APPLICATION

Name: _____

Address: _____

Telephone: _____

Preparation:

<u>Name of School Attended</u>	<u># of Years Completed</u>	<u>Degree</u>
High School: _____	_____	_____
College: _____	_____	_____
Postgraduate: _____	_____	_____
_____	_____	_____

Majors and first minors in college:

Major: _____ Minor: _____

Teaching Experience:

<u>Name of School</u>	<u>How long</u>	<u>Years</u>	<u>Grades or Subjects Taught</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Wisconsin Certificate held: _____ ELO#: _____

Wisconsin Substitute Teaching License #: _____ Expiration date: _____

PLEASE ATTACH A COPY OF YOUR CERTIFICATE.

Subject or grades you prefer to teach _____

Have you ever pleaded guilty to or been convicted of a misdemeanor or felony? Yes _____ No _____

If yes, provide further information as to the date, location of court, nature of the offense, and so forth. (The Clinton Community School District will consider your record only as it may substantially relate to the job for which you are applying.)

AUTHORIZATION, RELEASE, AND CERTIFICATION

I certify that all information on this application is true, complete, and correct to the best of my knowledge. I understand that any false or misleading statements by me, or material omissions of information requested of me, may result in rejection of my application or, if employed, my immediate dismissal.

I hereby give permission to the employer to seek to verify and supplement the information set forth in the application. I release from all liability or legal claims every person seeking or providing information, whether oral or written. A photocopy of this release shall be as valid as the original, and may be relied upon by all persons providing information.

I understand and agree that, if hired, I may voluntarily leave employment at any time, for any reasons, and that the District may end my employment at any time for any reason.

I understand this application will be considered inactive after ninety (90) days.

I certify that I have read (or have had read to me) and understand this authorization, release, and certification.

Applicant's Signature _____ Dated: _____

Applicants must submit a background check form along with this application in order to be considered for substitute teaching positions.

The Clinton Community School District Board of Education does not discriminate on the basis of the Protected Classes of race, color, national origin, age, sex, creed or religion, genetic information, handicap or disability, marital status, citizenship status, veteran status, military service, (as defined in 111.32, Wis. Stats.), sexual orientation, national origin, ancestry, arrest record, conviction record, use or non use of lawful products off the District's premises during non-working hours, or declining to attend an employer-sponsored meeting or to participate in any communication with the employer about religious matters or political matters, or any other characteristic protected by law in its employment practices or on the basis of transgender status, change of sex or gender identity.