

SUBSITITUTE TEACHER APPLICATION

PLEASE PRINT CLEARLY

Indicate how you w	vish to be add	dressed in	any corres	pondence:	Mr	_ Mrs	_ Ms	_ Miss
Name								
	Last			First		Mide	dle	
Email Address								
Mailing Address								
City			State		Zi	р		
Home/Cell Phone				Work Phone	e			
Date of Birth	Day	Month	Year	_				
Teacher Certifica	ation (Inclue	de copies o	of transcrip	ots and teach	ning certific	cates)		
Certificate held in S	State							
Education (Includ	e copies of t	ranscripts)				C)iploma,	 ,
Degree <u>Institution Attendee</u> <u>Certificate</u>	d	# (of Years Co	ompleted	Dates At	tended		or

Present or Last Employer	Address	Phone Number
Starting Date		Leaving Date
Reason for leaving		Supervisor's Name & Title
Describe the work you did:		
Present or Last Employer	Address	Phone Number
Starting Date		Leaving Date
Reason for leaving		Supervisor's Name & Title
Describe the work you did:		
Present or Last Employer	Address	Phone Number
Starting Date		Leaving Date
Reason for leaving		Supervisor's Name & Title
Describe the work you did:		

SUBSTITUTE TEACHER APPLICATION						
<u>Teaching Preference</u> : Indicate the level you would prefer to teach by checking the appropriate space. Early Childhood 5-Year-Old Kindergarten Primary 1-3 Intermediate 4-8 Do you have any areas of expertise?						
References						
Name	Name					
Title	_ Title					
Email	Email					
Phone Number	Phone Number					
Pastor's Information						
Name	Phone Number					
Email						
Address						

DECLARATION

I certify that the contents of this application are accurate in every respect. I acknowledge that misrepresentation may lead to rejection of my application or cancellation of this application. I understand that the primary focus of Community Christian School is religious in nature.

Signature	Date
<u>Please check documents you have submitted</u>	
Copy of Valid Teaching Certificate Current Resume Consent for Disclosure of Criminal Background Check Application	