

**APPLICATION FOR
SUBSTITUTE TEACHER**

Name: _____ Date: _____

Address: _____ Phone: _____

Social Security Number: (Optional) _____

NYS Retirement Number: _____

EDUCATIONAL AND PROFESSIONAL TRAINING

School or Institution Name	Major/Minor Course of Study	Degree or Diploma or Semester Hrs. Complete	Dates of Attendance
High School			
College			
Graduate Work			
Teaching Experience			

Certification Status: _____

Have you had substitute teaching experience before? Yes No

If so, School Districts and Year in which you have substituted:

FOR OFFICE USE ONLY

REFEERENCES:

Name	Position	Address	Phone # with Area code

1. Have you ever been discharged or asked to resign from a prior position? Yes No
2. Have you ever resigned from a prior position after a complaint has been received against you or your conduct was under investigation or review? Yes No
3. Have you ever been convicted of a crime or other violation of law, other than a minor traffic offense? Note that the term "conviction" includes please of guilty or "no contest". Yes No
4. Have you ever had a license or certificate of any sort suspended or revoked in any state, or have you ever voluntarily surrendered, temporarily or permanently, any sort of license or certificate in any state? Yes No

If you answered YES to any of the previous questions, provide full details on an additional sheet(s) including the specific court or agency involved, the date, offense in question, and the address of the court involved. Conviction or other disposition is not necessarily an automatic bar to employment.

Have you been previously fingerprinted pursuant to Part 87 of the Regulations of the Commissioner of Education? (Criminal History Record Check for Prospective School Employees and Applications for Certification.) Yes No

The District does not discriminate in employment or in the education programs and activities which it operates on the basis of race, color, national origin, religion, marital status, military status, sex, age, weight, sexual orientation, gender identity, ethnic group, religious practice, disability or predisposing genetic characteristic in violation of Title IX of the Education Amendments of 1972, Title VI and VII of the Civil Rights Act of 1964, 42 U.S.C. 12111 et. seq. known as the Americans With Disabilities Act or § 504 of the Rehabilitation Act of 1973, New York State Human Rights Law, and The Boy Scouts of America Equal Access Act of 2001.

I hereby certify that the facts set forth in this application are true and complete to the best of my knowledge. I further acknowledge that any falsification or omission will be sufficient cause for disqualification or dismissal, if employed, regardless of when discovered. I give Morris Central School the right to investigate all references and to secure additional job-related information about me. I hereby release from liability Morris Central School and its representatives for seeking such information, as well as anyone giving such information to them.

Substitute's Signature _____

Date _____