

# Clinton School District #124

"Transforming Potential into Performance"

701 South 8<sup>th</sup> Street ~ Clinton, MO 64735 ~ Telephone (660)885-2237 ~ Fax (660)885-7033

## APPLICATION FOR CLASSIFIED SUBSTITUTE POSITION

<b>FOR SCHOOL USE ONLY</b>	
Last Name	_____
Submitted to DESE	_____
Background Cleared	_____
Added to Sub List	_____

Date \_\_\_\_\_

(Please Print)

Name \_\_\_\_\_  
*Last First MI*

Address \_\_\_\_\_  
*Street City State/Zip*

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

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

Emergency Contact Person: \_\_\_\_\_

Emergency Contact Cell #: \_\_\_\_\_

Position Desired:

\_\_\_\_\_ Nurse Substitute      \_\_\_\_\_ Crossing Guard Substitute

School Preference (Check all that apply)

CECC/ECSE	<input type="checkbox"/>	Middle School	<input type="checkbox"/>
Elementary (K-2)	<input type="checkbox"/>	High School	<input type="checkbox"/>
Intermediate School (3-5)	<input type="checkbox"/>	Technical School	<input type="checkbox"/>

Days Available:    **Mon**    **Tues**    **Wed**    **Thurs**    **Fri**

Dates Not Available: \_\_\_\_\_

Have you ever been charged with, convicted or entered a plea, including a plea of *nolo contendere*, to any felony or misdemeanor whether or not sentence was imposed or suspended, except minor traffic violations?    \_\_\_ Yes    \_\_\_ No if yes, please explain: \_\_\_\_\_

### Previous Employers

Dates To/From	Name of Company & Supervisor	Phone Number	Reason for Leaving

**Education Experience (List name and location of school and highest grade completed)**

SCHOOL	NAME AND ADDRESS	DEGREE OR GRADE COMPLETED OR EQUIVALENT	DATES ATTENDED
HIGH SCHOOL			
COLLEGE			
TRADE SCHOOL			

References: (Please give the name, address, and phone number of three persons **who are not related to you** and who are not previous employers)

Name	Street	City	State/Zip

*Effective January 1, 2005, it is mandatory that ALL new hires (certified, support staff and substitutes) submit to a FBI/MO Highway Patrol fingerprint background check. The fee for the background check, to be paid by the employee, is \$40.30 Continued employment with the school district is contingent on a favorable background clearance. Employee will be reimbursed after 10 days of substitute work.*

*Effective January 1, 2009, our district participates in the "E-Verify" Program. Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States. Call Amanda Cothorn at 660-885-2237 for more information.*

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