

## APPLICATION FOR SUBSTITUTE TEACHER

*An Equal Opportunity Employer\**

Date of application _____				
<b>Personal Data</b>	Name _____ <span style="margin-left: 100px;"><i>Last</i></span> <span style="margin-left: 150px;"><i>First</i></span> <span style="margin-left: 100px;"><i>Middle initial</i></span>			
	Mailing address _____ <span style="margin-left: 100px;"><i>Street/Box</i></span> <span style="margin-left: 100px;"><i>City</i></span> <span style="margin-left: 100px;"><i>State</i></span> <span style="margin-left: 50px;"><i>ZIP Code</i></span>			
	E-mail address _____			
	Home phone _____ Cell phone _____ Other phone _____			
	Other name that may appear on records _____  <i>(Used for certification, reference, and criminal history record checks)</i>			
	Are you receiving Teacher Retirement System (TRS) retirement benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you employed as a part-time employee by a TRS-covered employer? <input type="checkbox"/> Yes <input type="checkbox"/> No (Required to determine if the district will be assessed a monthly surcharge as required by TRS rules.)			
<b>Assignment Preference</b>	Please list the days you are available to substitute and your assignment preferences.			
	Day(s) of week <input type="checkbox"/> Every day <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday Assignment <input type="checkbox"/> Any assignment <input type="checkbox"/> Elementary <input type="checkbox"/> Intermediate <input type="checkbox"/> Secondary <input type="checkbox"/> Special Education Preferred campuses: _____ _____			
<b>Position Data</b>	Credentials included with application: <input type="checkbox"/> Résumé <input type="checkbox"/> All teaching and professional certificates or licenses <input type="checkbox"/> All transcripts showing degrees			
	Have you been employed by Miles ISD in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No If you answered yes, provide dates of employment _____			
<b>Education/Training</b>	List the highest level of education attained: _____			
	Licenses and certificates granted _____			
	Name and location of schools attended	Course of study and major/minor	Diploma, degree, certificate, or license granted	Year graduated <i>(College only)</i>



## APPLICATION FOR SUBSTITUTE TEACHER

<b>Certification</b>	Certificates or Licenses Currently Held: <ul style="list-style-type: none"> <li><input type="checkbox"/> None</li> <li><input type="checkbox"/> Valid Texas</li> <li><input type="checkbox"/> Valid Other State _____</li> <li><input type="checkbox"/> Texas One-Year (out-of-state/country): Expiration date: _____</li> <li><input type="checkbox"/> Other: _____</li> </ul> Category/Level(s) of Certification: _____			
	Areas of Specialization/Supplemental Certificates/Endorsements (as listed on certification): _____ _____ _____			
	List teaching experience beginning with most recent years. Attach additional sheets if necessary.			
<b>Teaching Experience</b>	Name and location of school		Name and location of school	
	Type of assignment		Type of assignment	
	Dates taught		Dates taught	
	Principal's name and phone		Principal's name and phone	
	Reason for leaving		Reason for leaving	
	Name and location of school		Name and location of school	
	Type of assignment		Type of assignment	
	Dates taught		Dates taught	
	Principal's name and phone		Principal's name and phone	
	Reason for leaving		Reason for leaving	

## APPLICATION FOR SUBSTITUTE TEACHER

Other Work Experience	Provide a list of all other jobs or administrative positions you have held in the past 10 years. Attach additional sheets if necessary. Attach résumé if available.			
	Employer name and location		Employer name and location	
	Position/title held		Position/title held	
	Dates employed		Dates employed	
	Supervisor's name and phone		Supervisor's name and phone	
	Reason for leaving		Reason for leaving	
	Employer name and location		Employer name and location	
	Position/title held		Position/title held	
	Dates employed		Dates employed	
	Supervisor's name and phone		Supervisor's name and phone	
Reason for leaving		Reason for leaving		
References	List references the district can contact regarding your work history.			
	Full name of reference	School district/ firm name	Mailing address	Position/title
				Area code/ phone number

## APPLICATION FOR SUBSTITUTE TEACHER

<b>General Information</b>	<p>Have you ever been convicted of, pled guilty or no contest (nolo contendere) to, or received probation, suspension, or deferred adjudication for a felony or any offense involving moral turpitude (including, but not limited to, theft, rape, murder, swindling, and indecency with a minor)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please state where, when, and the nature of the offense _____</p> <p>_____</p> <p>_____</p> <p>(A felony conviction is not an automatic bar to employment. The district will consider the nature, date, and relationship between the offense and the position for which you are applying.)</p>
<b>Verification</b>	<p>I hereby affirm that all information provided in this application is true and accurate to the best of my knowledge and understand that any deliberate falsifications, misrepresentations, or omissions of fact may be grounds for rejection of my application or dismissal from subsequent employment.</p> <p>I authorize the references listed on the previous page to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all such parties from liability for any damage that may result from furnishing the same to you.</p> <p>I understand that the district is required by Texas Education Code to review criminal history record information of substitute teachers.</p> <p>I understand that I am required to report any outside employment with a TRS-covered employer to the district and provide a monthly record of hours worked so the district can determine if it will be subject to the monthly surcharge.</p> <p style="text-align: center;">             _____              Signature         </p> <p style="text-align: center;">             _____              Date         </p> <p>This application becomes the property of the district. The district reserves the right to accept or reject it.</p>

*\*Applicants for all positions are considered without regard to race, color, sex (including pregnancy), national origin, religion, age, disability, genetic information, veteran or military status, or any other legally protected status. Additionally, the district does not discriminate against an applicant who acts to oppose such discrimination or participates in the investigation of a complaint related to a discriminating employment practice.*

The district Title IX Coordinator is Robert Gibson PO Box Miles, Texas 76861 325-468-2861.