

SUBSTITUTE TEACHER APPLICATION

DATE:	SOCIAL SECURITY NO.		
NAME:		TELEPHONE:	
STREET ADDRESS:			
CITY:	STATI	E:	ZIP:
ARE YOU A U.S. CITIZEN? YES	NO 🗌		
ARE YOU LEGALLY ABLE TO WORK IN	THE U.S.? YES 1	NO (Proof of work eli	gibility will be required upon employment.
Are you able to perform the essential function	s of the position with or withou	it accommodations?	
What are you certified to teach?			
DO you hold a teaching certificate? Have you completed the Child Abuse Identificate List substitute teaching assignments you are w	cation and Reporting training?	A FOLDER NO. ((Attach a copy)
ATHLETIC COACHING ENDORSEMENT: LIST EXTRA-CURRICULAR ACTIVITIES		EREST IN COACHIN	NG/SUPERVISING:
WERE YOU IN THE MILITARY SERVICE December 7, 1941 to December June 25, 1950 to January 31, 195 DID YOU RECEIVE AN HONORABLE	31, 1946	G ANY OF THE FOI August 5, 1964 t August 2, 1990 t	
HAVE YOU EVER BEEN CONVICTED OF IF YES, EXPLAIN:	L	ILD ABUSE OR A R	ELATED OFFENSE?
HAVE YOU EVER BEEN CONVICTED OR	PLEAD GUILTY TO SEXUA	AL ABUSE OR A RE	LATED OFFENSES? IF YES, EXPLAIN:
HAVE YOU EVER BEEN CONVICTED OR TRAFFIC OFFENSES? (For purposes of this or no contest, a deferred judgment, and adjudi	application "convicted" includ	es a conviction follow as a minor.) IF YES,	ving a trial, a guilty plea, a plea of contendere EXPLAIN:

Yes answers to the foregoing questions will not automatically result in your disqualification from consideration for employment. How recent the criminal office, the nature of the offense and its relationship to your fitness for the job will be taken into account.

ACADEMIC PREPARATION

Name of School	State	Dates	Semester Hours	Degree Diploma	Major Subjects	*Semester Hours	Minor Subjects	*Semester Hours
High School								
College/University								
Graduate								

*1 Quarter Hour = 2/3 Semester Hour

TEACHING EXPERIENCE

(Inexperienced Teachers: List Student teaching experience)

Place	Date	Type of Position	Grade or Subjects	No. of Months	Salary

NON-TEACHING EXPERIENCE

List non-teaching experience of four months or longer duration within the past five years.

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Name of Employer	Date of Employment	No. of Years	Location	Nature of Work			
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REFERENCES

Give references including superintendents and principals, under whom you have taught, who are qualified to write of your teaching ability, scholarship, character and personality.

Name	Address	Telephone No.	Official Position

The facts set forth in my application are true and complete. I understand that if employed, false statements on this application or in any accompanying letter or resume or other application materials may be considered sufficient cause for dismissal. I hereby authorize the Humboldt Community School District or its agents to make an investigation of my employment history, criminal/police records and personal history. I authorize former employers, my references, or any other person or entity contacted by the District or its agents investigating the merits of this application to disclose personnel or criminal/police records, information about my qualifications for the position or any other information relating to my application and release them from any liability for such disclosure.

I also understand that neither this application nor any statement regarding possible employment by an employee of the Humbold
Community School District constitutes a contract of employment. If a contract is to exist, it will be executed in writing by the
Humboldt Community School District through signature of the President of its Board of Directors. I understand that this application
for employment is valid for no more than one year. After that, I must resubmit an application in order to be considered for positions at
the Humboldt Community School District.

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Date:		Applicant's Signature:	

Before consideration, applicant needs to complete: Letter of Application, Application form, Resume', Credentials and Transcripts and provide a current Teaching Certificate.

"It is the policy of the Humboldt Community School District not to discriminate on the basis of race, creed, color, age (for employment), sex, sexual orientation, gender identity, marital status (for programs), socioeconomic status (for programs), national origin, disability, or religion in its educational programs and employment practices as required by the Iowa Code section 216.7. If you have questions or grievances related to compliance with this policy please contact the Humboldt Community School District, Lisa Thul, Assistant Finance Manager, 23 3rd St N PO Box 130 Dakota City, IA 50529; 515-332-1330, https://icrc.iowa.gov, or the Iowa Civil Rights Commission, Grimes State Office Building, 400 E. 14th St., Des Moines, IA 50319-1004; phone number 515-281-4121, 800-457-4416; web site: https://icrc.iowa.gov, or Director of the Office for Civil Rights U.S. Department of Education, Citigroup Center, 500 W. Madison Street, Suite 1475, Chicago, IL 60661-7204, 312-730-1560-Fax 312-730-1576, occ.nicago@ed.gov.