

SUBSTITUTE TEACHER APPLICATION



Dent-Phelps R-III School District

27870 Highway C
Salem, MO 65560
573-729-4680
Fax: 573-729-8644

Website: www.dentphelps.k12.mo.us
email: admin@dentphelps.k12.mo.us

PRINT CLEARLY OR USE TYPEWRITER. Answer all questions completely. This application is part of the review procedure. Incomplete information will affect the evaluation of your application. No question on this application should be answered in such a manner as to disclose race, color, creed, national origin, ancestry, age, marital status, sex, or the existence of any physical or mental condition unrelated to the performance of the position for which you are applying.

Name _____

Previous Last Name(s) _____

Social Security Number _____

Mailing Address _____

Residence Address _____

Telephone: Home _____

Work _____

Date of Application _____

Please complete entire application. Do not use "refer to resume" or equivalent statement.

Person other than spouse who will always be able to provide us with your current address and/or phone number:

Name _____

Mailing Address _____

Telephone _____

PROFESSIONAL REFERENCES

List three references, other than relatives, who have knowledge of your work experience and abilities. At least one should be a previous Principal, Supervisor or Mentor Teacher. Please list in reverse chronological order, beginning with your most recent first.

Name	Title	Address	Phone

EDUCATIONAL AND PROFESSIONAL TRAINING

Please list in chronological order, all educational institutions attended. Transcripts must be provided for each institution listed.

Name and Location of Institution	From	To	Semester Hours*	Degree/ GPA**	Major	Minor
Undergraduate College Work						
Graduate College Work						

SUBSTITUTE TEACHING EXPERIENCE

SCHOOL DISTRICT / ADDRESS / PHONE	School Year	No. of Mos.

This district does not discriminate on the basis of age, race, color, national origin, religion, gender, or disability in its educational programs or activities, or in its employment practices.

WORK EXPERIENCE

Account for any gaps in employment. Attach a specific supplement if necessary. Do not indicate, "See Resume."

From _____ Mo. Yr. To _____ Mo. Yr.	No. of Yrs. FT PT	Employer Address	Duties
Name of Supervisor		Phone	Salary/Rate of Pay
		Reason for leaving	
From _____ Mo. Yr. To _____ Mo. Yr.	No. of Yrs. FT PT	Employer Address	Duties
Name of Supervisor		Phone	Salary/Rate of Pay
		Reason for leaving	
From _____ Mo. Yr. To _____ Mo. Yr.	No. of Yrs. FT PT	Employer Address	Duties
Name of Supervisor		Phone	Salary/Rate of Pay
		Reason for leaving	

STATEMENT OF TEACHING PHILOSOPHY

In your own handwriting, briefly describe your philosophy of education, illustrating your approach as a substitute teacher.

____ Brain Compatible Learning

____ Cognitively Guided Instruction

____ Computers as an Instructional Tool

____ Conflict Management

____ Constructivist Teaching/Learning

____ Cooperative Learning

____ Hands-on /Minds-on Math

____ Hands-on /Minds-on Science

____ Integrated Instruction

____ Literature-Based Programs

____ Peer Tutoring

____ Thematic Units

____ Writing Across the Curriculum

____ Year-round Education

____ Other _____

____ Other _____

____ Other _____

CONVICTION REPORT

Because of the tremendous responsibility Dent-Phelps R-III School District has to its school children and community, the following information is needed from all applicants and employees regarding convictions. *A record of conviction does not prohibit employment; however, failure to complete this form accurately and completely may mean disqualification from consideration for employment or may be cause for dismissal if employed and may result in prosecution for filing false information with a public agency. Applicants and employees must report any convictions that occur subsequent to the time they initially completed this form. Questions regarding this information should be directed to the Superintendent or Personnel designee. Please read carefully and answer ALL Questions.

Please print clearly.

Name _____
Last
First
Middle

Other names used (maiden) _____

Social Security Number _____

Have you ever been convicted of a minor offense other than a minor traffic violation(s)? (Circle) Yes No

Have you ever been convicted of a felony? Yes No

Have you ever been convicted of a sex or drug related offense? Yes No

Have you ever been convicted of a dangerous crime against children as defined in ARS 13.604.01? ** Yes No

If any of the above questions are circled "Yes," fill in the information below and attach a letter of explanation.

CONVICTION INFORMATION (Include all except minor traffic violations)

1. CONVICTION / CHARGE		DATE OF CONVICTION	COURT OF CONVICTION
CITY	STATE	AMOUNT OF FINE	LENGTH OF JAIL TERM
REMARKS		LENGTH AND TERMS OF PROBATION	
2. CONVICTION / CHARGE		DATE OF CONVICTION	COURT OF CONVICTION
CITY	STATE	AMOUNT OF FINE	LENGTH OF JAIL TERM
REMARKS		LENGTH AND TERMS OF PROBATION	

*CONVICTION means the final judgment on a verdict or a finding of guilty, a plea of guilty, or a plea of nolo contendere, in any state or federal court of competent jurisdiction in a criminal case, regardless of whether an appeal is pending or could be taken. Conviction does not include a final judgment that has been expunged by pardon, reversed, set aside or otherwise rendered invalid.

**Missouri law requires applicant to give notice of any conviction for dangerous crimes against children. These crimes are defined as second degree murder, aggravated assault, sexual assault, molestation of a child, sexual conduct with a minor, commercial sexual exploitation of a minor, sexual exploitation of a minor, child abuse, kidnapping and sexual abuse.

GENERAL EMPLOYMENT INFORMATION

- | | | | |
|---|-----|----|--------------------------------------|
| 1. Are you legally eligible to work in the United States? (Circle) | Yes | No | |
| 2. Do you have authorization to begin working immediately? (Circle) | Yes | No | |
| 3. Have you ever been dismissed from a position? (Circle) | Yes | No | |
| If yes, explain _____ | | | |
| 4. Have you ever been asked to resign from a position? (Circle) | Yes | No | |
| If yes, explain _____ | | | |
| 5. Have you ever worked for the Dent-Phelps R-III School District? (Circle) | Yes | No | (If yes, when and in what capacity?) |
| _____ | | | |

REQUIREMENTS FOR SUBSTITUTE TEACHER APPLICATIONS

Thank you for your interest in the Dent-Phelps R-III School District. We look forward to reviewing your application.

Applications are required to be complete when submitted. Items 1-3 must be submitted together for your application to be considered complete.

1. **COMPLETED APPLICATION, RESUME, AND COVER LETTER:** You must complete all sections of the application form. We urge you to enclose a resume and a cover letter indicating any specialty areas with your application. It is to your advantage to express all your specialties, training and areas of expertise.
2. **TRANSCRIPTS:** Unofficial transcripts are acceptable but must show a minimum of 60 credit hours.
3. **BACKGROUND CHECK:** A completed FBI Background Check must be turned in at the time of this application.
4. **FORM S:** All applicants must fill out and sign a Missouri Department of Elementary and Secondary Education Application For Substitute Certificate of License To Teach, Form "S".

PLEASE READ THE FOLLOWING CAREFULLY, THEN SIGN AND DATE.

I certify that all statements made in this entire application are true and I agree and understand that any deliberate misstatement or omission of material facts will cause forfeiture on my part of all eligibility to any employment or dismissal of employment with the Dent-Phelps R-III School District. I authorize the Dent-Phelps R-III School District to independently verify all information I have given on this application, to include verification of educational background and employment records. I specifically waive any right I have to examine a copy of any written communication regarding employment by any former or current employer of mine. I further release any institution or individual from any liability or damages that might result or be claimed because of information provided. I have been advised that consideration for salary credit for previous experience in public schools will be based upon full-time certificated work experience, as recorded on this application. Such credit will be given only at the initial time of employment. I understand that my employment is not finalized until the background investigation has been completed.

I have been advised that all applicable state and federal statutes apply to the Dent-Phelps R-III School District practices and procedures. Dent-Phelps R-III is an equal opportunity institution. It is the policy and intent of this District not to discriminate in its educational programs and activities or in employment on the basis of race, color, gender, age, religion, creed, marital status, citizenship, national origin, physical or mental handicap, veteran status, or any other unlawful basis.

Signature

Date

Applications will be kept on active file for 45 days.