

Spirit Lake Community Schools

Substitute Teacher Application

Last Name	First Name		Middle Name		
Home Address		City, State, Zip			
Home Phone		Work Phone			
Cell Phone		E-Mail Address			
Best Hours to Be Reached		Social Security Nur	mber		
Certification:					
Major	Minor		Grade Levels Certified		
What building level(s) do you prefer to teach in? Elementary School Middle School High School Are there any subjects/grade levels you prefer NOT to teach?					
My current certificate is on file in the Superintendent's Office: Yes No					

Days available for substitute teaching:						
Briefly describe your teaching experience.						
Are you currently employed? Yes No						
If employed, where and when can you be reached?						
References Please provide three references who have first-hand knowledge of your character, personality, scholarship and teaching ability.						
Name & Position	Phone	Address				
Name & Position	Phone	Address				
Name & Position	Phone	Address				

Form 14 - Affirmative Action Information

Completion of this form is optional. However, we would appreciate your supplying the requested information. In order to comply with regulations established by the U.S. Equal Opportunity Commission, the Office of Civil Rights in the U.S. Department of Education, Iowa Code §19B.11, and I.A.C. 281-ch. 95, the District must report statistical summaries of the information requested. The information is used for this purpose and other affirmative action purposes only.

Section i					
American Indian	or Alaskan Native	е			
White, not of His	panic Origin				
Black, not of His	panic Origin				
Asian or Pacific	Islander				
Latino or Hispan	ic				
Other					
Section II					
Male	Female	Age			
Handicapped					
Yes					
No					
Disabled Veteran (an	y era)				
Yes					
No					
Vietnam Era Veteran	(1964 - 1975)				
Yes					
No					
Section III					
Please check the sou	urce from which y	ou learned of this position.			
		fessional journal, newsletter or publication in the space provid		ding lowa Workforce Development listings.	
Position annound	cement at school.				
Personal contact	ts by district.				
All other activitie	s. "If other activit	ty, please specify in the space	provided below.*		
*Name of Publication	I		*Other Activity		
Name		Date	e	Position Sought	