

HARRISON COUNTY SCHOOL DISTRICT

308 Webster Avenue

Cynthiana, Kentucky 41031-8834

Phone: 859-234-7110

Date of Application: _____

Date Available for Work: _____

Application for Substitute Teacher Position

NAME: _____
(LAST) (FIRST) (MIDDLE)

PRESENT ADDRESS: _____ TELEPHONE: _____

PERMANENT ADDRESS: _____ TELEPHONE: _____

Are you a KTRS Retiree () YES () NO If yes, from what County did you retire _____

Have you ever been convicted of a felony? Yes _____ No _____

Kentucky Certification

Type: _____ Grade: _____ Subject Field: _____

Certificate Number: _____ Effective Date: _____

If you do NOT hold a valid Kentucky Certificate:

() Have you applied for one? Date: _____

() Are you eligible for other certificates not presently held?

Please List: _____

() Do you hold certificates from other states?

Please List: _____

Professional Training: (If you have not yet graduated, list degree and date anticipated)

School/Location Diploma/Degree Hours Major/Minor Grade Distinction/Honors

How many college or university hours have you earned in your teaching field during the last three years? _____

SUPERVISED TEACHING

Subjects or Grades Taught: _____

Training School: _____ City and State: _____

Supervising Teacher: _____

Number of Semester Hours: _____ Grade Received in Course: _____

Comments: _____

TEACHING EXPERIENCE (List in order of most recent experience)

Name of School	Location	Grade or Subject Taught	Dates From	To	Principal

What type of contract do you have with your present employer?

() Limited () Tenure

SUMMARY OF TEACHING EXPERIENCE:

KINDERGARTEN _____ YEARS JUNIOR HIGH (MIDDLE SCHOOL) _____ YEARS
ELEMENTARY _____ YEARS SENIOR HIGH (HIGH SCHOOL) _____ YEARS
ADMINISTRATIVE _____ YEARS OTHER _____ YEARS

REFERENCES:

Give names of those who have closely observed your work as a teacher, employee, or as student. Please list supervising teacher if you are a recent graduate.

Name	Official Position	Mailing Address	City, State, Zip

GENERAL QUALIFICATIONS

Please give a summary of General Qualifications (Membership in organizations and honors received, college activities which you are able to direct or coach, and particular interests, abilities or hobbies)

I hereby affirm that the statements made in this application are true to the best of my knowledge and belief.

Date Signature of Applicant

AN EQUAL OPPORTUNITY EMPLOYER

The Harrison County Board of Education operates in compliance with the law concerning NON-DISCRIMINATION ON THE BASIS OF HANDICAP ACT (P.L 93-112).

The Harrison County School District does not discriminate on the basis of race, color, age, gender, religion, national origin or disability.

For this type of employment, State Law requires a national and state criminal history background check as a condition of employment.

A certified transcript of your college credits and your teaching certificate should be attached with this application. (If not, please forward as soon as possible)

All applications are kept on file for two years.