



Referred By: _____ School: _____

CLASSIFIED SUBSTITUTE APPLICATION (No Charge For Fingerprinting)

Name _____
(Last) (First) (Initial)

Address _____
(Street) (City) (Zip Code)

Phone: _____ Email: _____

Are you a member of the Public Employees Retirement System (PERS) Yes No

Are you legally authorized to work in the United States: Yes No

Language other than English (speak, read, write): _____

Do you have any restrictions such as schools or departments? Please explain. _____

1. Do you have any physical limitations which may limit your ability to perform in the position(s) for which you have applied? Yes No If yes, explain: _____

What, if answer is yes, what accommodations will be required? _____

2. Have you ever been dismissed or forced to resign from employment for misconduct or unsatisfactory service? Yes No If yes, explain: _____

3. Have you ever been convicted of a felony or, within 2 years, a misdemeanor? Yes No
If yes, explain: _____

*A conviction will not necessarily disqualify you from employment.

4. Were you previously employed by us? Yes No If yes, when: _____

5. Do you have a California Drivers License? Yes No Restricted? Yes No
If restricted, describe _____

6. Ethnic Origin: No, Not Hispanic or Latino Yes, Hispanic or Latino

Race Information *(please check one or more of the following):*

- White Black Asian Filipino
- Pacific Islander American Indian or Alaskan Native

Prior to employment, the following items are required:

- _____ Fingerprint Clearance (Fingerprint Fee Waived)
- _____ Current Tuberculosis or T.B. Assessment

**Please check the following positions that you are interested in substituting for
Classified Substitute Positions**

Noon Duty

School Age Child Care Center Leader I

Required CPR & First Aid Certificate (Certificate must include Adult, Child & Infant CPR).

_____ CPR Expires

Health Clerk:

Required CPR & First Aid Certificate (Certificate must include Adult, Child & Infant CPR) Must complete HC Shadowing Process.

_____ CPR Expires

_____ Shadowing Date

Instructional Assistant:

Proof of 48 semester units, (AA degree) or a higher degree from a recognized college or university, or pass Every Students Succeeds Act (No Child Left Behind), complete Pre-Employment Physical.

_____ POP Date

_____ ESSA Test Score

Library Clerk:

_____ Training Date

Receptionist:

_____ Training Date

School Secretary:

CPR & First Aid Certificate (to include Adult, Child & Infant CPR).
Must complete Secretary Shadowing Process

_____ CPR Expires

_____ Shadowing Date

Custodian:

Must pass Custodian Exam with 70%, complete Pre-Employment Physical & complete training.

_____ Test Results

_____ POP Date

_____ Training Date

Food Service Worker:

Must pass Classified Sub Exam with 70% & Complete Pre-Employment Physical

_____ Test Results

_____ POP Date

_____ Training Date

I am available for substituting on **(please circle):** M T W Th F

Preferred work school site: _____

I hereby certify that all statements and facts set forth in my application for employment are true and complete. Any material misrepresentation or deliberate omission of fact in my application may be justification for refusal of, or if employed, termination from employment with the Oak Grove School District.

Applicant Signature

Date