

**SUBSTITUTE APPLICATION**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Name as it appears on your social security card)

ADDRESS: \_\_\_\_\_  
Street City State Zip

SOCIAL SECURITY NUMBER: \_\_\_\_\_ DOB: \_\_\_\_\_

EMAIL (Required): \_\_\_\_\_ PHONE: \_\_\_\_\_

SUSTITUTE EMPLOYMENT DESIRED: (Check all that Apply)

- Teacher (Substitute License Required)
- Paraprofessional/Aide (Substitute License Required)
- CNP (Lunchroom Worker)
- Custodial
- LPN/RN (Nurse License Required)

Note: Employment in desired position is contingent upon required licenses, fingerprints and background clearance being obtained and provided by the applicant to Guntersville City Schools Payroll Department.

EDUCATION	NAME AND LOCATION OF SCHOOL	NUMBER OF YEARS ATTENDED	GRADUATE	SUBJECTS STUDIED
HIGH SCHOOL			YES NO	
GED OR EQUIVALENT			YES NO	
COLLEGE			YES NO	
OTHER			YES NO	

*Guntersville City Schools is an equal opportunity employer. It is the policy of the board that no person in the school system, shall, on the basis of race, color, creed, religion, sex, age, national origin, or disability, be denied the benefits of or be subject to discrimination in any education program or activity, which includes employ- ment, retention, promotion, transfer or dismissal.*

<b>FORMER EMPLOYERS</b> (Please list last four (4) employers, begin with the last one first)				
DATE (Month/Year)	EMPLOYER (Name/Address)	POSITION	REASON FOR LEAVING	
FROM-				
FROM-				
FROM-				
FROM- TO				
<b>REFERENCES</b> (Please list four (4) persons to whom you have known for at least one year)				
NAME	ADDRESS	BUSINESS	PHONE	YEARS ACQUAINTED

APPLICANT'S AFFIDAVIT—I understand and agree to the following:

- Information given on this application becomes part of my personnel record and is accurate and complete.
- I will be held to the same professional and ethical standards as all other employees of Guntersville City School Board of Education.
- I will abide by all policies set forth in the Guntersville City Schools Board of Education Policies and Procedures Handbook that apply to my position.
- In the event that a workshop or in-service training for substitute personnel is offered by this Board of Education, I will attend.
- Failure to abide by these policies could mean my dismissal from service.
- Employment with Guntersville City Schools in any substitute capacity is contingent upon obtaining a substitute license (\$30.00 non refundable fee), being fingerprinted and obtaining a satisfactory background clearance. Signature of this document constitutes your agreement that, "I understand that I am being employed on an 'EMERGENCY TEMPORARY' basis pending the receipt of a satisfactory background clearance. If the results of this background check prove unsatisfactory, I understand that my employment will be terminated." The background check and fingerprint fee of \$46.90 is non-refundable and if subsequent sets of prints are required to obtain clearance Guntersville City Schools will not be responsible for the cost of reprinting.
- Some substitute positions will be subject to drug testing. Failure to pass the drug test could mean termination of service.

APPLICANTS SIGNATURE

(Applicant's signature signifies acceptance of the above state conditions of employment)

DATE