

# Jefferson City Schools

## SUBSTITUTE TEACHER APPLICATION PROCESS

Print the application packet which includes the application, general information sheet and reference forms. Reference forms should be provided to persons who will provide a reference for you. Reference forms must be submitted to the central office. Email forms to: [angela.vinson@jeffcityschools.org](mailto:angela.vinson@jeffcityschools.org) The completed application and general information sheet should be completed and submitted to central office.

\*\*\* Note: All applicants for a substitute position must complete a four (4) hour training session. Please contact Dr. Angela Vinson ([angela.vinson@jeffcityschools.org](mailto:angela.vinson@jeffcityschools.org)) for further information on steps needed to complete the training.

A background check is required prior to your name being submitted for board approval. The cost is \$47.00 payable by cash or money order made payable to Jefferson City Schools. Information and instructions regarding background checks must be obtained from Jefferson City Schools Central Office located at 345 Storey Lane.

All completed paperwork must be submitted to Jefferson City Schools Central Office. This includes: completed application, general information sheet, two (2) reference forms, proof of education (diploma or GED), college transcripts, valid teaching certificate if applicable, copy of driver's license and social security card or valid passport, clear background check.

\*\*When all the above have been completed, including a clear background check, your name will be submitted to the Board of Education for approval. The Board meets on the 2nd Thursday of each month (requirements must be met no later than the Friday prior to the Board meeting for your name to be submitted for approval. Once approved by the Board, you will receive information (via email) regarding completing other paperwork on our YOSS on boarding platform.

### Checklist

- \_\_\_\_\_ Completed application and general information sheet
- \_\_\_\_\_ Reference forms (2)
- \_\_\_\_\_ Proof of Education
- \_\_\_\_\_ Valid Teaching Certificate/Paraprofessional Certificate (if applicable)
- \_\_\_\_\_ Paid for and completed background check
- \_\_\_\_\_ Copy of Driver's License
- \_\_\_\_\_ Copy of Social Security Card or Valid Passport



**JEFFERSON CITY SCHOOLS  
345 STOREY LANE  
JEFFERSON, GA 30549  
(706) 367-2880**

**APPLICATION FOR SUBSTITUTE TEACHING POSITION**

Date \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name Middle Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code Phone Number

EDUCATION AND TRAINING-NAME OF SCHOOL/LOCATION/DATES/DEGREE/DIPLOMA

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EMPLOYMENT HISTORY (Please use additional sheet if needed)

\_\_\_\_\_  
\_\_\_\_\_

Do you hold a current Georgia Teaching Certificate? \_\_\_\_\_

If YES, provide the certificate type and area(s) \_\_\_\_\_

School preference: Circle one or more

Jefferson Elem      Jefferson Academy      Jefferson Middle      Jefferson High

Circle Grade Preference: PK 1 2 3 4 5 6 7 8 9 10 11 12      All

Please state your reason for seeking a substitute position with Jefferson City Schools.

---

---

Have you ever been convicted of a felony or misdemeanor other than a traffic offense?  
\_\_\_\_\_ If yes, please explain \_\_\_\_\_

REFERENCES (Include names, addresses, and telephone numbers)

---

---

---

**Please read carefully before signing this application:** I understand that I have reasonable assurance that my name can and will remain on the active approved substitute teacher list as long as I meet the substitute teacher requirements and demonstrate acceptable performance. Failure to be employed/selected as a substitute does not constitute grounds for unemployment insurance programs.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The Jefferson City School System is an Equal Opportunity Employer. It is the policy of this System not to discriminate on the basis of race, color, sex\*, physical handicap\*\*, national origin, or age in its employment. \*Title IX- 1972 Education Amendments  
\*\* 1973 Rehabilitation Act

JEFFERSON CITY SCHOOLS  
EMPLOYEE GENERAL INFORMATION SHEET

NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

PERSONAL EMAIL \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL # \_\_\_\_\_

MARITAL STATUS    SINGLE        MARRIED

CERTIFICATE (if applicable) \_\_\_\_\_ YEARS OF EXPERIENCE \_\_\_\_\_

POSITION \_\_\_\_\_

LOCATION    JES    JA    JMS    JHS

START DATE \_\_\_\_\_ HOURS PER DAY \_\_\_\_\_

<p><b>OFFICE USE ONLY</b></p> <p>CPI _____</p> <p>ACCOUNT CODE(S) _____</p> <p>_____</p> <p>_____</p>
---

JEFFERSON CITY SCHOOLS  
345 STOREY LANE  
JEFFERSON, GA 30549

**SUBSTITUTE TEACHER CONFIDENTIAL REFERENCE FORM**

Dear \_\_\_\_\_  
(Please print name of person providing reference)

\_\_\_\_\_ has applied for a job as a \_\_\_\_\_ and has given your name as a reference. Thank you for your assistance in completing this form. Your reply will be used in a confidential manner.

Please use the following scale in rating the applicant:

(1) Superior; (2) Above Average; (3) Average; (4) Below Average; (5) Not Observed

**PERSONAL**

Exhibits poise and self control \_\_\_\_\_  
Communicates effectively (language usage, clarity, etc.) \_\_\_\_\_  
Handles situations tactfully (common sense) \_\_\_\_\_  
Relates well to adults and children \_\_\_\_\_  
Ability to take constructive criticism \_\_\_\_\_  
Exhibits dependability; good attendance \_\_\_\_\_

**JOB EFFECTIVENESS**

Ability to follow written directions (lesson plans) \_\_\_\_\_  
Ability to keep records \_\_\_\_\_  
Efficient use of time \_\_\_\_\_  
Ability to follow a schedule \_\_\_\_\_  
Reliable and prompt with task/assignments \_\_\_\_\_  
Maintains confidentiality of information \_\_\_\_\_

What word or words would you use to best describe the applicant?  
\_\_\_\_\_

In what capacity have you had the opportunity to observe or work with the applicant?  
\_\_\_\_\_

Would you employ/re-employ this applicant? \_\_\_\_\_ Please use the reverse side for any further comments.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
Current Position/Organization

Address \_\_\_\_\_

Telephone \_\_\_\_\_

JEFFERSON CITY SCHOOLS  
345 STOREY LANE  
JEFFERSON, GA 30549

**SUBSTITUTE TEACHER CONFIDENTIAL REFERENCE FORM**

Dear \_\_\_\_\_  
(Please print name of person providing reference)

\_\_\_\_\_ has applied for a job as a \_\_\_\_\_ and has given your name as a reference. Thank you for your assistance in completing this form. Your reply will be used in a confidential manner.

Please use the following scale in rating the applicant:

(1) Superior; (2) Above Average; (3) Average; (4) Below Average; (5) Not Observed

**PERSONAL**

Exhibits poise and self-control \_\_\_\_\_  
Communicates effectively (language usage, clarity, etc.) \_\_\_\_\_  
Handles situations tactfully (common sense) \_\_\_\_\_  
Relates well to adults and children \_\_\_\_\_  
Ability to take constructive criticism \_\_\_\_\_  
Exhibits dependability; good attendance \_\_\_\_\_

**JOB EFFECTIVENESS**

Ability to follow written directions (lesson plans) \_\_\_\_\_  
Ability to keep records \_\_\_\_\_  
Efficient use of time \_\_\_\_\_  
Ability to follow a schedule \_\_\_\_\_  
Reliable and prompt with task/assignments \_\_\_\_\_  
Maintains confidentiality of information \_\_\_\_\_

What word or words would you use to best describe the applicant?

\_\_\_\_\_  
In what capacity have you had the opportunity to observe or work with the applicant?  
\_\_\_\_\_

Would you employ/re-employ this applicant? \_\_\_\_\_ Please use the reverse side for any further comments.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Current Position/Organization

Address \_\_\_\_\_ Telephone \_\_\_\_\_

