

School District of Rib Lake Professional Staff SUBSTITUTE APPLICATION

(Please Print or Type)

An Equal Opportunity Employer

GENERAL INFORMATION

Name Last	Last First		Middle		Social Security Number	
Zuov	1100		Tittadio	Doesna Se		
AddressStreet			ity	State Zip C		
Succi		C.	ity	State Zip C	ode	
Home Telephone	Cell Pl	hone				
E-Mail Address	Electro	onic Portfolio (if	available)			
		(
You are applying to a position a	ns Professional Staff Su	ıbstitute (i.e. Cla	ssroom teacher	substitute)		
The state of the s		<u> </u>		· · · · · · · · · · · · · · · · · · ·		
Have you filed an application wit	h our school district befo	ore? Yes	_ No			
If Yes, give date:	and position applie	ed for:				
Have you acquired tenure in another	her district?	es, in what school	district?			
Date available to substitute	-	,				
			O.N.			
	C	CERTIFICATION	ON			
List all areas in which you hold valid	l Wisconsin and/or out-of-s	state teaching certifi	cates. NOTE: Ap	plicants holding a certif	icate from another state	
must obtain Wisconsin licensure in order to teach in the School District of Rib Lake.						
Area of Certification		Iss	suing State	Grade Level	Date Issued	
	EDUCAT	ΓΙΟΝΑL BACE	KGROUND			
School or Institution and Location	n	Dates Attended	Major/Minor	Diplomas, Degrees	Grade Point	
School of Institution and Location	II.	Dates Attended	Wiajor/Willion	or Credits Earned	Average (GPA)	

Nondiscrimination Statement

It is the policy of the District that no person may be illegally discriminated against by reason of their age, race, religion, creed, color, disability, pregnancy, marital status, sex, citizenship, national origin, ancestry, sexual orientation, or any other factor prohibited by state or federal law.

TEACHING/SCHOOL RELATED WORK EXPERIENCE

List most recent experience first. Include student teaching if less than three years experience. Use separate sheet if necessary.					
From	То	Total Years	Name & Address of Employment	Principal/Immediate Supervisor	Grade or Subject Taught or Type of Job

REFERENCES

References should include superintendents, principals, or professors who have first-hand knowledge of your professional competence and your personal qualifications. Experienced teachers should include the superintendent and principal of the two most recent schools in which employed.

NAME	POSITION	ADDRESS	TELEPHONE

Student Teaching References: Please attach photocopies of letters of references and/or evaluations from college/university student teacher supervisor and cooperating teacher(s).

OTHER QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experiences (including U.S. military service) and/or state any additional information you feel may be helpful in considering your application, i.e. honors, awards, activities, technology skills or	
professional development activities:	

GENERAL BACKGROUND INFORMATION

You must give complete answers to all questions.

If you answered "Yes" to any of the above questions, please provide a detailed explanation on a separate sheet of paper, including dates, and attach it to this application. You must list <u>all</u> offenses, and for each conviction provide date of conviction and disposition, regardless of the date or location of occurrence. Conviction of a criminal offense is not a bar to employment in all cases. Each case is considered on its merits. Your answers will be verified with appropriate police records. Please print and sign your name on the sheet, and include your social security number.

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Are you a citizen of or authorized to work in the United States?	Yes	No	
Were you ever convicted of a criminal offense?	Yes	No	
Are you currently under charges for a criminal offense?	Yes	No	
Have you ever forfeited bond or collateral in connection with a criminal offense?	Yes	No	
Within the last ten years, have you resigned after being notified that you would be fired or been non-renewed for discipline reasons?	Yes	No	
Have you ever been professionally disciplined in any state? (Professionally disciplined means the annulment, revocation, or suspension of your tor commission of state government, such as the Wisconsin Department of Public Ins		No aving received a letter of reprimand from an agency, b	ooard
Offers of employment are conditional based upon the satisfactory completic. Conviction of a crime or pending charge is not an automatic bar to employ offense and the relationship between the offense and the position for which presently have pending, any violations of law including ordinance violation pending charges or convictions will not be used or considered unless they a	ment. The district wil 1 you are applying. Ha 1 sother than minor tr	I consider the nature of the offense, the date of ave you ever been found guilty of, or do you affic violations? (In accordance with State law, ed to circumstances of the particular job.)	the
CERTIFICATION AND RE	LEASE AUTHO	DRIZATION	
I hereby authorize the School District of Rib Lake and any agent acting on its behalf suitability for employment. I authorize any former employer, person, reference, firm District of Rib Lake any information regarding my background. In review of this ap School District of Rib Lake its Board, and its agents, as well as all providers of infor furnishings and receiving of this information. A photocopy of this release shall be a Further, I certify that all information on this application and related attachments are misleading statements made by me, or material omission of information requested of immediate dismissal.	n, corporation, education plication and related attemation from any liability s valid as the original and true, and correct to the b	nal institution, or government agency to give the Scho achments, I release from all liability and/or legal clain ty and for any damage which may result from the and may be relied upon by all persons providing inform best of my knowledge. I understand that any false or	ool ms th
I hereby acknowledge that I have read and understand the foregoing.			
Date		Signature of Candidate (In Ink) Must be original	

APPLICATION SUBMISSION INSTRUCTIONS:

 $\label{eq:mail} Mail, fax, or email the following: application, cover letter, resume, letters of reference (3), transcripts, and license(s).$

School District of Rib Lake District Administrator PO Box 278 Rib Lake, WI 54470

Phone: (715) 427-3222 Fax: (715) 427-5022 Email: tgrubbs@riblake.k12.wi.us

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