SUBSTITUTE TEACHER APPLICATION GIDEON NO. 37 SCHOOL DISTRICT 400 MAIN STREET, P.O. BOX 227 GIDEON, MISSOURI 63848

Date						
	at Name	E	ingt Nome		4: ddla Noma	
La	Last Name		First Name		Iiddle Name	
Other names that	may appear or	n your transcrip	ots or records:			
Current Address_						
Street Current Phone()					State Zip	
Email Address						
Days Available:	Mon	Tues	Wed	_ Thurs	Fri.	
Grades Preferred:	: K-6	7-12	Both			
Type of Certifica	te: (circle one	e) Substitute	or Regular Teac	ching Certific	cate	
If Regular Teachi List Subject:			l:E	xpiration Da	te	
Total College Ho	urs:	or degrees	s held			
Please attach a c	copy of your t	ranscript and/	or teaching cert	ificate		
Previous Teachi	ng Experience	e:				
DISTRICT NAME & LOCATION	POSITION	DATES OF EMPLOYMEN	NUMBER OF YEARS	SUPERVIS	OR PHONE	
References:			,	,	,	
NAME ADDRE		ESS	PHONE	Pe	POSITION	

Employment Questions:

1.	Have you ever been arrested for, or charged with or convicted of a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$300.00)					
2.	issued a determination or finding of cause or reas	s the Missouri Division of Family Services or a similar agency in any other state or jurisdiction, ever used a determination or finding of cause or reason to believe or suspect that you have engaged in ysical, emotional, psychological or sexual abuse or neglect of a child?				
	READ CAREFULLY	BEFORE SIGNING				
	nowledge and agree to the following provisions as coyment:	onditions to consideration of my application for				
1.	I hereby authorize my current and former employers and references to furnish any information about and about my work experience. I release my current and former employers and references from any a all liabilities or damages of any nature as a result of providing such information. My current and form employers and references may rely on a signed copy of this release.					
2.	I understand and consent to having criminal and arrest records checks as well as background checks by the Missouri Division of Family Services as a condition for consideration of my application for employment.					
3.	I certify that the answers given in this application are true and complete to the very best of my knowledge. In the event I am employed by the District and in the further event that I have provided false or misleading information in this application or in subsequent employment interviews, I understarthat my employment may be terminated at any time after discovery of the false or misleading information.					
4.	I understand that this application will be consider submitted. I understand that if I wish my candida application.	ed active during the school year in which it was acy to remain open after that date I must submit another				
	Signature	Date				
T1 4	C'1 N 27 C 1 1 D' . ' . ' . ' . ' . ' . ' . ' . ' . '					

The Gideon No. 37 School District is an equal opportunity employer. The School District considers applicants for all positions without regard to race, color, religion, sex, national origin or disability. If you have any inquiries, complaints or concerns about any pre-employment procedure or requirement, including completing this application, or about the District policy of non-discrimination, you may contact the superintendent of schools at 573-448-3911.

2-27-12 Gideon No. 37 School District Form 4120-S