

SAN LUIS OBISPO COUNTY SUBSTITUTE TEACHER APPLICATION

Date of Application _____

Social Security Number _____

(In accordance with the Federal Privacy Act of 1974, disclosure of your social security number is voluntary. The social security number will be used for identification purposes to ensure that proper records are maintained.)

I. PERSONAL DATA

Name _____
Last
First
Middle

Present Address _____

Telephone Numbers () _____ () _____ () _____
Home
Cell
Work

Former Name(s) Used _____

Are you fluent in any language other than English? If so, please state language(s) _____

II. PREFERENCES

Grade Level/Specialty - Please check one or more categories:

- Elementary School Middle School* High School*
 Community School (SLOCOE) Preschool Special Education (SLOCOE)**

* Subject Matter 1) _____ 2) _____ 3) _____

III. EDUCATION AND PROFESSIONAL TRAINING

Name of University-City/State	Graduation Date	Degree	Major Subject(s)	Minor Subject(s)

Have you completed one or more of the Substitute Training Workshops at the San Luis Obispo County Office of Education?

- Yes No (If "yes," please attach a copy of the certificate of completion.)

** Applicants applying for positions with the San Luis Obispo County Office of Education (SLOCOE) must complete Attachment "A."

IV. CREDENTIAL INFORMATION

Before you can begin working, you must have (or at least have applied for) a valid California Teaching Credential, which authorizes the service for which you are employed. Emergency 30-Day Substitute Permits are valid at the following districts:

- | | |
|-----------------|--------------------------------------------|
| Atascadero | San Luis Coastal (Secondary Schools Only) |
| Cayucos | San Luis Obispo County Office of Education |
| Lucia Mar | San Miguel |
| Paso Robles | Shandon |
| Pleasant Valley | Templeton |

A. California credentials you now hold (or have applied for):

Type	Authorization Subject	Expiration Date

If you have applied for a credential but have not received it, you must show proof of application in order to receive a Temporary County Certificate that allows you to work while waiting to receive your credential.

B. Have you ever had any adverse action on your credential?

- Yes No (If "yes," explain on a separate sheet of paper.)

C. Have you ever had any credential, application, permit, license, or other document authorizing public school service or teaching suspended, revoked, voided, denied and/or otherwise rejected for cause in California or any other state?

- Yes No (If "yes," explain on a separate sheet of paper.)

D. Have you passed the CBEST?

- Yes No

V. STUDENT TEACHING EXPERIENCE

	First Assignment	Second Assignment
Name and Location of School		
Name of District		
Grade Level and/or Subject		
Dates of Assignment		
Master Teacher's Name:		

VI. TEACHING EXPERIENCE

Dates of Employment: From _____ To _____ Full-Time _____ Part-Time _____ (If P-T, hours worked/week _____)

Type of Teaching Position: (Regular, Substitute, Temporary) _____

Name of District/Place of Employment _____

Address of District/Place of Employment _____

Name and Title of Supervisor _____ Phone Number _____

Grade Level and/or Subject Assignment _____

Reason for Leaving _____

Dates of Employment: From _____ To _____ Full-Time _____ Part-Time _____ (If P-T, hours worked/week _____)

Type of Teaching Position: (Regular, Substitute, Temporary) _____

Name of District/Place of Employment _____

Address of District/Place of Employment _____

Name and Title of Supervisor _____ Phone Number _____

Grade Level and/or Subject Assignment _____

Reason for Leaving _____

Dates of Employment: From _____ To _____ Full-Time _____ Part-Time _____ (If P-T, hours worked/week _____)

Type of Teaching Position: (Regular, Substitute, Temporary) _____

Name of District/Place of Employment _____

Address of District/Place of Employment _____

Name and Title of Supervisor _____ Phone Number _____

Grade Level and/or Subject Assignment _____

Reason for Leaving _____

VII. EXPERIENCE OTHER THAN TEACHING

Position	Employer	Location (City/State)	Dates of Employment

VIII. AFTER YOU ARE HIRED

The law requires written proof that you are entitled to work in the United States (i.e. Passport, Social Security Card, Birth Certificate, Driver's License, or other).

IX. PERSONAL DATA

A. Have you ever been discharged or requested to resign from a position?

Yes No (If "yes," explain on a separate sheet of paper.)

X. REFERENCES Please indicate references below and include those who have knowledge of your teaching experience, or any experience you have working with children.

Name	Position	District (or Company) and Address	Phone Number

I hereby certify that the information contained in this application is true to the best of my knowledge and belief, and I acknowledge that any representation may result in an invalid application, denial of interview, loss of offer of employment, and dismissal if employed. I release from all liability persons and organizations reporting information required by this application.

Date _____ Signature _____

Note: If applying to multiple districts, you may duplicate this form before signing.

ORIGINAL SIGNATURE IS REQUIRED ON EACH APPLICATION.

- REQUIRED ATTACHMENTS:** The following items must accompany each application in order to be considered for employment.
1. Copy of California Teaching Credential and/or Emergency 30-Day Substitute Permit (front and back)
 2. Verification of DOJ fingerprint processing through the County Office of Education
 3. Verification of TB Clearance
 4. College/University placement papers and/or three (3) current letters of reference
 5. Resume
 6. Complete copies of transcripts (front and back)
 7. California Basic Education Skills Test (CBEST) Verification

SAN LUIS OBISPO COUNTY OFFICE OF EDUCATION
SUBSTITUTE TEACHER APPLICATION

ATTACHMENT "A"

I. CHECK THE PROGRAMS YOU ARE WILLING TO TEACH

Alternative Education

- Community School
- Juvenile Court School

Special Education

- Severely Handicapped
- Deaf & Hard of Hearing

State Preschool

Do you sign language? Yes No

II. READ CAREFULLY BEFORE SIGNING.

I understand that I will be required, if offered employment, to register my original California Credential(s).

Because of the unique population of the SLOCOE Special Education program, all substitutes are required to attend an orientation BEFORE they can be placed on the active substitute list. Orientations are held frequently and at a time convenient for most substitute candidates. Upon approval of application, your name will be forwarded for an invitation to the next orientation meeting.

Due to the mandates of AB1610 and AB1612, all substitute employees must have Department of Justice fingerprint processing completed with SLOCOE BEFORE they can become active employees. Please contact the Personnel Department at (805) 782-7236 for a fingerprinting appointment.

SIGNATURE _____

DATE _____

