

**Application for Substitute Teacher Position**

**MADRID-WADDINGTON CENTRAL SCHOOL**

P.O. Box 67, 2582 State Highway 345  
Madrid, New York 13660  
315-322-5746, Ext. 35221

**MINIMUM REQUIREMENTS TO SUBSTITUTE:**

**One year of college – eligible to sub as a Teaching Assistant, grades K-8.**

**Must have completed a minimum of two years of college to apply as Teacher substitute.**

1. Complete this application and forward it to the Superintendent's Office at the address above; together with items listed below.
2. Include cover letter, resume and two letters of recommendation.
3. Forward copies of teaching certificates or TEACH account printout with this application.
4. Original transcripts required to show proof of college enrollment

**I. BACKGROUND INFORMATION**

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(Last Name) (First Name) (Middle)

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(Street Address) and (Mailing, if different) (City) (State) (Zip)

Email address: \_\_\_\_\_ Telephone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

U.S. Citizen: Yes / No

Are you a member of the NYS Teachers' Retirement System? Yes / No Retirement System # \_\_\_\_\_

Have you been a member of the Armed Forces of the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

Branch \_\_\_\_\_

Have you completed the Fingerprint Clearance process with NYS Education Dept? \_\_\_\_ Yes \_\_\_\_ No

**II. SUBJECT AREAS:**

Please list grade levels or curriculum areas for which you will substitute teach:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Please list grade levels or curriculum areas for which you will **not** substitute teach:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Interested in Teaching Assistant Positions? \_\_\_\_\_ YES \_\_\_\_\_ NO

**III. EDUCATIONAL BACKGROUND Undergrad/Graduate:** Please list all secondary schools, colleges, and universities attended as undergrad or graduate student.

<u>School /College/University</u>	<u>Location</u>	<u>Degree</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

List under/graduate honors received: \_\_\_\_\_

Please list your undergrad/graduate college extracurricular activities: \_\_\_\_\_

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

**IV. New York State Certification:**

Initial / Provisional: (Date)	(Title)	(Expiration)
_____	_____	_____
_____	_____	_____

Professional or Permanent:(Date)	(Title)	(Expiration)
_____	_____	_____
_____	_____	_____

**V. RECORD OF EMPLOYMENT.** Please give names of employers, addresses, telephone numbers, dates of employment, and title or position while you were there. Please list most recent position first. Do not include part time or summer employment unless you consider it significant. It is important that this record of employment account for all substantial periods of time.

<u>Position</u>	<u>Dates of Employment</u>	<u>Employer</u>	<u>Employer's Address</u>	<u>Telephone Number</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**VI.** On an attached sheet, please give a candid description of yourself, stressing those personal qualities, assets, and abilities which you feel characterize your work in your present position. This will also apply if you are currently a student. Please describe any experiences which you feel have significantly contributed to your abilities for the position you are seeking and any matter, other than the items of information already requested, which you believe will be of significant value to us.

**VII. REFERENCES:** Please list the names, addresses, and telephone numbers of three people (not relatives) whom we may contact regarding your abilities and your work. Also, please attach to this application two letters of recommendation from two other references not listed below, if these are not provided in your placement folder.

<u>Name</u>	<u>Address</u>	Telephone <u>Work, Cell or Home</u>	<u>Email</u>	Nature of <u>Association</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**IX.** Madrid-Waddington Central School is an Equal Opportunity Employer. Mr. Eric Burke is the Compliance Officer for Title IX. Any inquiries regarding compliance with Title IX should be directed to the Compliance Officer, Madrid-Waddington Central School, PO Box 67, Madrid, New York 13660 (315-322-5746), or through the Director of the Office of Civil Rights, Department of Health, Education and Welfare, Washington, D.C. I understand, should I be employed by the Madrid-Waddington Central School District either on a permanent or substitute basis, that I will be informed of my rights to join the New York State Retirement System. I authorize the Madrid-Waddington Central School District to investigate all statements in this application and to secure all appropriate information from all my employers, references, academic institutions, and from governmental departments and agencies. I do hereby authorize such employers, references, academic institutions, and governmental departments and agencies to release such information and I do hereby release all of those employers, references, academic institutions, and the Madrid-Waddington Central School District from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the Madrid-Waddington Central School District.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

Please do not write below this line

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**Application received:**

**Comments/Notes:** \_\_\_\_\_