SCHOOL DISTRICT OF PITTSVILLE

EMPLOYMENT PROCEDURES FOR SUBSTITUTE TEACHING STAFF

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1.	Secure application form in person, mail, telephone, or website (www.pittsville.k12.wi.us).
2.	Return the completed application form with a copy of each the following: Social Security Card Driver's License DPI Licensure Resume
3. PH	Please contact the Administration Office at (715) 884-6694 if you have a change of address or phone number, or if you receive employment elsewhere. HASE II – APPLICATION SCREENING AND INTERVIEWS
1.	Applications will be screened by the District Administrator, School Principal, or Department Supervisor.
2.	Candidates will be notified when work is available. Substitute pay is established under School Board Policy.
3.	A criminal background check will be conducted prior to employment with the School District.
	NOTICE TO APPLICANTS: If you require accommodation in the application process, please inform us.

SCHOOL DISTRICT OF PITTSVILLE

SUBSTITUTE TEACHER **EMPLOYMENT APPLICATION**

NAME:	LAST NAME	FIRST NAME		M.I.	ATE:		
NAME:				L	AIE:		
ADDRESS:							
CITY:			STATE:			_ ZIP:	
TELEPHONE: ()		E-MAIL:				
Have you ever applied	I for employment wi	th us?					
☐ YES ☐ NO	If YES: Month a	nd Year		Location: _			
Are you presently und	er contract with any	school district for th	nis school year	or next scho	ol year?	YES N	10
Position Desired:					Pay Expected:		
Odition Boomea.					ray Expedied.		
Are you legally eligible	for employment in	the United States?	☐ YES	□ NO	гау Ехресіец.		
Are you legally eligible	With Accommodat	ion	ccommodation	n all the dutie	s of the position y		
	With Accommodat	ion	.ccommodatior	all the dutie	s of the position y		
Are you legally eligible	With Accommodat eeded, briefly descr	ion	NAL BAC	all the dutie	s of the position y		DEGREE/ DIPLOMA
Are you legally eligible Can you perform If accommodation is n	With Accommodat eeded, briefly descr	ion	NAL BAC	all the dutie	s of the position y O # OF YEARS	DID YOU	
Are you legally eligible Can you perform If accommodation is n	With Accommodat eeded, briefly descr	ion	NAL BAC	all the dutie	s of the position y O # OF YEARS	DID YOU	
Are you legally eligible Can you perform If accommodation is n	With Accommodat eeded, briefly descr	ion	NAL BAC	all the dutie	s of the position y O # OF YEARS	DID YOU	
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Are you legally eligible Can you perform If accommodation is n	With Accommodat eeded, briefly descr	ion	NAL BAC	all the dutie	s of the position y O # OF YEARS	DID YOU	
Are you legally eligible Can you perform If accommodation is n	With Accommodat eeded, briefly descr	ion	NAL BACK	all the dutie	s of the position y O # OF YEARS	DID YOU	

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS (Exclude those which may disclose your race, color, religion, or national origin.)

EMPLOYMENT HISTORY	Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.
Company Name	Telephone ()
Address	Employed (State Month and Year)
	From: To:
Name of Supervisor	Weekly Pay
	Start: Last:
State job title and describe your work	Reason for leaving
Company Name	Telephone
Address	Employed (State Month and Year)
	From: To:
Name of Supervisor	Weekly Pay
	Start: Last:
State job title and describe your work	Reason for leaving
Company Name	Telephone
Address	Employed (State Month and Year)
	From: To:
Name of Supervisor	Weekly Pay
	Start: Last:
State job title and describe your work	Reason for leaving
Company Name	Telephone
	()
Address	Employed (State Month and Year)
	From: To:
Name of Supervisor	Weekly Pay
	Start: Last:
State job title and describe your work	Reason for leaving
	Do not contact:
	Reason:
We would like to contact employers listed above unless	Do not contact:
you indicate those you do not want us to contact.	Reason: Do not contact:
	Reason:

	Please provide names and telephone numbers of at least three references and where they may be reached.
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aa	te of the offense, and the relationship between the offense and the position for which you are apply	ying.	
1.	Have you ever been investigated for alleged misconduct in the course of any employment?	☐ Yes	□No
2.	Have you ever resigned, been disciplined, or dismissed from any teaching, other school position, or any other position (paid or unpaid) involving children, in part, for alleged immoral conduct* or incompetence**?	☐ Yes	□ No
3.	Have you ever had a teaching or teacher aide certificate or license to be employed denied, revoked, or suspended?	☐ Yes	□No
4.	Is disciplinary action of your educationally related certificate or license currently pending in any state?	☐ Yes	□No
5.	Have you ever been investigated for sexual conduct, abuse, or neglect that resulted in any legal action up to and including conviction, guilty adjudication for violating a civil law, or a local ordinance?	☐ Yes	□ No
6.	Have you ever been convicted of any felony or misdemeanor criminal offense?	☐ Yes	□ No
7.	Have you ever paid a civil forfeiture or fine for a non-traffic related offense (including municipal court violations)?	☐ Yes	□ No
8.	Is any criminal charge pending against you in any state?	☐ Yes	□ No
9.	Has your teaching/administrative contract ever been non-renewed? If so, for what reason?	☐ Yes	□ No
	r any YES response, provide a detailed written explanation on this or other sheet of paper. n you perform, with or without accommodation, all the duties of the position you seek?		
	☐ With Accommodation ☐ Without Accommodation		
lf a	accommodation is needed, briefly describe what is needed:		
In cosee provand with My mis imn	RELEASE Inthorize the School District of Pittsville to investigate my personal employment history and authorize any former employer, personal ency to give the School District of Pittsville any information they may have regarding me. Such inquiries may include and not ality and quantity of my work, work history and record, character, qualifications, and/or records or convictions. Interest of Pittsville's review of this application, I release from all liability or legal claims the School District or Pittsville's review of this application, I release shall be as valid as the original, and may reviding information, whether oral or written. A photocopy of this release shall be as valid as the original, and may reviding information. I give this waiver, release, and covenant not to sue for myself, my heirs, assigns and successors in interest for a covenant not to sue understanding that the information obtained may be such as to disqualify me for employment. I understand to confidentiality and will not request copies of such information. In signature below certifies that all information on this application is true, complete, and correct to the best of my knowledge. I leading statements made by me, or material omissions of information requested of me, shall constitute grounds for rejection of mediate dismissal. In the School District of Pittsville any information in the provided and not all provided and not include and	trict of Pittsvill ay be relied us brever. I give to d that such in I understan any application	le and every person upon by all persons this waiver, release, information is sought and that any false or or, if employed, my
	Signature: Date:	:	
(2	Date.	·	

Conviction of a crime or arrest is not an automatic bar to employment. The District will consider the nature of the offense, the

SCHOOL DISTRICT OF PITTSVILLE

5459 Elementary Avenue, Suite 2, Pittsville, WI 54466 (715) 884-6694 Fax No. (715) 884-5218

CRIMINAL BACKGROUND INVESTIGATION

All individuals recommended for employment with the School District of Pittsville must complete a criminal background check prior to hire. The following information is required of all prospective employees in order to process the data request:

Name (Last)			(First)	(Middle)	
Sex:	Race:	Date of Birth:	Social Security	Number:	
Other nam	nes by which y	ou have been known:			
		d information shall be k ersonnel file if hired.	ept in a confidential	file and is not part of your application	
		Authorizati	ion and release stateme	ent	
Having made application for employment with the School District of Pittsville and desiring them to be informed as to my character and background, I hereby authorize the School District of Pittsville to investigate my character and background and release all persons whomsoever from any liability because of furnishing said information.					
Signature	e:			Date:	

MISSION STATEMENT: Expecting **Excellence** and **Integrity** from all, developing **Innovative** students, strengthened through **Partnerships** with parents and the community.

VISION: Expecting Excellence and Innovation, Honoring Legacy and Embracing Partnerships.



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