

NOTTOWAY COUNTY PUBLIC SCHOOLS
Director of Personnel
P.O. Box 47, 10321 E. Colonial Trail
Nottoway, Virginia 23955
(434) 645-9596

APPLICATION FOR SUBSTITUTE TEACHER

(The information requested must be submitted on this application form. A resume or additional information may be attached as a supplement but may not be submitted in lieu fully completing this application.)

Applicant's Full Name _____
(Last) (First) (MI) (Maiden Name)

Other Name(s) _____
(Please provide any additional information relative to change of name, use of an assumed name, or nickname, necessary to enable a check on your work or school record.)

Present Mailing Address _____
(Street) (City) (State) (zip)

Permanent Mailing Address _____
(Street) (City) (State) (zip)

Telephone Numbers:
Present _____ Permanent _____ Work _____

Social Security Number _____ (Note: Completion of number is optional. Failure to submit social security number on this form will not prohibit employment consideration. Social Security number may be required on other forms prior to employment.)

My signature below authorizes the school division to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references and other Sources deemed appropriate in the sole discretion OF the school division. I waive my right of access to any such information, and without limitation hereby release the school division and the reference source from any liability in connection with its release or use. This release includes the sources cited above and illustrative examples as follows: the local Sheriff, information from the Central Criminal Records Exchange of either data on all criminal convictions or certification that no data on criminal convictions are maintained, information from the Virginia or other State Department of Social Services Child Protective Services Unit and any Locality to which they may refer for release OR information pertaining to any findings of child abuse or neglect investigations involving me.

Furthermore, I unconditionally certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I acknowledge that these questions shall be continuing in nature, and I have a duty to update, change or further amplify my answers to guarantee accuracy, at all times. I understand that any omission, misleading or falsely answered statement made or implied by me on this application, or any supplement to it, whether written or oral, will be sufficient grounds for failure to employ or for my immediate discharge should I become employed with the school division. In the event the School Board determines, in its sole discretion, the existence of a material adverse report or omission as to any information, I agree that the employment offer/appointment will be deemed revoked immediately without further action, notice, or process. In conclusion, I acknowledge that if accepted for employment, I hereby agree to abide by the policies, regulations, and directives of the school division.

Date _____ **Signature Of Applicant** _____

The Nottoway County Public School system does not discriminate on the basis of race, national origin, age, religion, political affiliation, disability, handicapping conditions, or sex in its educational program or employment. No person shall be denied employment solely because of any impairment which is unrelated to the ability to engage in essential activities involved in the position or program for which application has been made.

I. EDUCATIONAL BACKGROUND (List chronologically)

Level of Education	Name of School	State	Diploma or Degree	Type of Degree	Year of Graduation	Dates of Attendance (From - To)
Elem. School						
High School						
College						

If you have been issued a teaching license, please submit a photocopy.

Type of license, year of expiration, and area(s) of endorsement: _____

II. PREVIOUS WORK EXPERIENCE (List chronologically, beginning with most recent and attach a sheet if necessary.)

Employer	City/County	State	Kind of Work	Dates of Employment	Reason for Leaving

III. LIST PREVIOUS SUBSTITUTE TEACHING EXPERIENCE

Name of School System	City/County	Grade Level	Dates

Please include a narrative summary describing your substitute teaching experience:

List all subject areas or strength:

If you cannot be available to substitute on a full-time basis for the entire year, please list the specific dates and/or days of the week you are available.

IV. GENERAL INFORMATION

Month, Day, and Year available for employment _____

If presently employed, why do you wish to change?

Have you ever been discharged, advised or requested to resign from a position? (If yes, attach explanation) _____ No Yes

Have you ever been charged of a violation of law other than a minor traffic violation? _____ No Yes

(If yes, attach explanation) _____

Have you ever been convicted of a violation of law other than a minor traffic violation? _____ No Yes

(If yes, attach explanation) _____

Have you ever had any certificate, permit, or license revoked or suspended? (If yes, attach explanation) _____ No Yes

Are any criminal or non-civil charges or proceedings pending against you? (If yes, attach explanation) _____ No Yes

Have you been convicted (as guilty or not innocent, or a determination of abuse or neglect founded against you) of any offense involving moral turpitude, the sexual molestation, physical or sexual abuse or rape of a child, or any like offense against an adult (If yes, explain on back) _____ No Yes

V. REFERENCES

It is the applicant's responsibility to have the following information provided to the School Division in order to be considered for employment: (Please note that references may be contacted upon receipt of the application whether or not an opening exists.)

The names of at least three reference sources must be provided and must include current employer if employed, or last employer if not currently employed.

Name of Reference	Position/Relationship	Mailing Address	Phone Number
1.			
2.			
3.			

VI. OTHER INFORMATION

To avoid conflict of interest, list any local school board member or employee relative(s) in the school division and cite relationship:

Are you able to perform all essential functions of the job for which you are applying with or without accommodation?No Yes

Please write a narrative summary of any experience with children relative to this application: _____

Why do you wish to substitute teach in Nottoway County ?

NOTE: For the high school graduate, a copy of the diploma, high school transcript, or other verification of high school completion must be submitted with this application. For the college graduate, a copy of the degree awarded for an official transcript must be submitted.