

TIPTON R-VI SCHOOL

APPLICATION FOR SUBSTITUTE TEACHING

First Middle Last

Address_____

Telephone_____Social Security #_____

Degree or Degrees Held_____

(If no degree, please indicate semester hours earned)

Major Subject_____Minor Subject_____

Name of College_____

Date Degree Earned_____Do you hold a Mo. Teaching certificate?_____

If yes, give title and grade_____

Expiration date_____No. of years in teaching_____

Ever been convicted of a crime other than a traffic violation?_____

Ever had a probable cause determination issued by the Department of Family Services?__

Nature of work: (If in grades, specify what grades, if secondary in given subjects)

List in order of preference the grades or subjects in which you wish to substitute

Date_____