



THE STANLEY CLARK SCHOOL

The Stanley Clark School

3123 Miami Street, South Bend, IN 46614 (574) 291-4200

APPLICATION FOR SUBSTITUTE TEACHING

Date: _____

NAME: _____
First Middle Last

Present Address:

Telephone: _____

Cell Phone: _____

Email: _____

TEACHING EXPERIENCE

	<u>School</u>	<u>Position</u>	<u>Subjects Taught & Other Duties</u>
1.	_____	_____	_____
2.	_____	_____	_____

Preferred grades and areas for substitute teaching: _____

Preferred days for substitute teaching: _____

Please indicate any foreign language skills: _____

EDUCATION

	<u>College or University</u>	<u>City</u>	<u>Degree</u>	<u>Major</u>	<u>Minor</u>
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

List other academic studies not covered above, such as participation in workshops and institutes:

- _____
- _____
- _____

State Teaching Certificate Awarded:

State

Subject

REFERENCES

If applicant is experienced, references should be administrators and colleagues. If applicant is inexperienced, they should be undergraduate (or graduate) instructors.

1. _____

3. _____

2. _____

