

MOUNTAIN VIEW CORE KNOWLEDGE SCHOOL

890 FIELD AVE
CANON CITY, CO 81212

PHONE (719)275-1318
FAX (719)275-1992

SCHOOL USE ONLY

Application Rcvd ___
Resume ___
Transcripts ___
License ___
Reference Letters ___

SUBSTITUTE TEACHER APPLICATION FORM

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or handicap.

Application Date _____

Personal Information:

LAST NAME FIRST NAME MI

PRESENT ADDRESS CITY STATE ZIP PHONE #

PERMANENT ADDRESS CITY STATE ZIP PHONE #

EMAIL ADDRESS

I am willing to sub in the following areas

___ Elementary ___ Middle School ___ Spanish ___ Music/Band ___ Art ___ Library ___ PE

Do you hold a valid Colorado Teaching or Substitute License? ___yes ___no

If "yes" indicate endorsement(s) _____

If "no", have you applied? ___yes ___no Date ___/___/___ If "no", are you eligible for a License? ___ Yes ___no

Are you available to work? ___ Full Time ___ Part Time ___ Temporary

Have you ever been employed with Mountain View Core Knowledge School? ___yes ___no If "yes" give date _____

Have you ever been dismissed from a position or asked to resign? ___yes ___no If "yes", state where and describe reasons on a separate sheet of paper

Are you employed now? ___yes ___no May we contact your present employer? ___yes ___no

Are you on a lay-off or subject to recall? ___yes ___no

Are you a US citizen? ___yes ___no Are you prevented from lawfully becoming employed in this country because of visa or immigration status? (Proof of citizenship or immigration status will be required upon employment.) ___yes ___no

Have you ever been convicted of a felony within the last seven years? ___yes ___no If "yes", provide complete details on a separate sheet of paper indicating date, charge, place and action taken.

Can you travel within the district if the job requires it? ___yes ___no

Do you speak/write/read any languages other than English? ___yes ___no

EDUCATION

Name of High School	Location	Graduation Date

Name of Colleges/Universities, Location, and Date(s) Attended	Date From	Date To	Degree	Major	Sem. Hours	Minor	Sem. Hours

EMPLOYMENT EXPERIENCE

Please use the space below to identify your experience working/interacting with children (please attach a resume identifying all other experience):

Employer	Address	Position	From/To	Supervisor's Name and Phone Number
Reason for Leaving:				()
Reason for Leaving:				()
Reason for Leaving:				()
Reason for Leaving:				()

List professional, trade, business or civic activities and offices held. (You may exclude those which indicate race, color, religion, sex, or national origin):

Summarize special skills and qualifications acquired from employment or other experiences:

Please respond to the following in your own handwriting on a separate sheet of paper:
Describe the essential skills necessary for working effectively with students.

REFERENCES

Include any administrator or supervisor under whom you have worked or college instructor if you have not yet graduated. Do not include relatives or persons who have furnished references for your placement office credentials. You may include persons not connected with education who are qualified to speak regarding your fitness for the position.

Name	Occupation	Address	Residents Phone/ Business Phone
			() ()
			() ()
			() ()

PLEASE READ CAREFULLY BEFORE SIGNING

AUTHORIZATION FOR BACKGROUND INFORMATION

I hereby authorize any person or entity whatsoever including, but not limited to, any employer, law enforcement agency, administrator, state agency, institution or private information bureau to furnish to Mountain View Core Knowledge School, or any employee or agent on its behalf, any and all information or records it may have, and further to discuss with Mountain View Core Knowledge School. I specifically waive any rights or privileges I have to confidentiality of such information and release Mountain View Core Knowledge School and any person or entity providing information from all legal responsibility or liability that must resole from this authorization.

This authorization shall continue in full force and effect until terminated by me in writing. Further, if I should become employed by Mountain View Core Knowledge School, this authorization shall continue for the duration of such employment. A photographic copy of this authorization shall be valid as the original.

I further agree that neither Mountain View Core Knowledge School nor any other person or entity shall be held liable in any respect if an employment offer is not tendered to me by Mountain View Core Knowledge School or is subsequently withdrawn or terminated for any reason whatsoever. I further understand that failure to provide any of the information requested may prevent consideration of my application for employment.

I certify that the information given by me on this application and any supplement is true and correct to the best of my knowledge. I understand that false statements on this application may result in termination of employment.

Date

Signature of Applicant

Fremont RE-1, including Mountain View Core Knowledge School, is an equal opportunity and affirmative action employer and complies with Title IX.

**FOR SCHOOL USE ONLY
DO NOT WRITE ON THIS PAGE**

REFERENCE CHECK

Employer	Person Contacted	Comments
1		
2		
3		
4		

TEST RESULTS

Test Administered	Raw Score	Rating	Analysis & Comments

INTERVIEW SUMMARY

Name	Date	Comments

FINGERPRINT AND APPLICANT OATH REQUIREMENTS

On January 1, 1991, House Bill 90-1077 (22-60-105.2 and 22-32-10918 C.R.S.) went into effect. This **law** requires the fingerprinting of **all persons hired after January 1, 1991**, in Colorado school districts.

There is a \$40.00 administration fee that you must pay when you submit your fingerprint card to School District Fremont RE-1. This payment covers the cost of the Colorado Bureau of Investigation and the Federal Bureau of Investigation running your fingerprints through their computer files. If you have a valid Colorado teaching certificate, the fingerprinting and oath obligation have already been met. If you are an applicant for a classified position or an emergency substitute teaching position at either Mountain View Core Knowledge School or the Fremont RE-1 District and are **selected for employment**, you must be fingerprinted prior to appointment.

Fingerprinting will be done on a specific fingerprint card supplied by School District Fremont Re-1. Printing is done by the Cañon City Police Department at the applicant's expense (\$10.00).

House Bill 90-1077 also requires that applicants certify under penalty of perjury that they have or have not been convicted of committing felonies or certain misdemeanors. This oath must be given in the presence of and verified by a **notary public**.

Thank you for your cooperation in meeting these state requirements. If you have any questions, please contact Human Resources, School District Fremont RE-1, 101 North 14th St., Cañon City, CO 81212, (719) 276-5700.

NOTE: File this form independent of this application.

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890 FIELD AVE.
CAÑON CITY, CO 81212**

APPLICANT'S OATH

Social Security Number _____ Date of Birth ____/____/____

Name _____
Last First Maiden

I HAVE APPLIED FOR _____ POSITION.

I am the above listed applicant and I do hereby certify under penalty of perjury, either (check one):

1. _____ **I HAVE NEVER BEEN** convicted** of any felony* or misdemeanor* (other than a misdemeanor traffic offense or traffic infraction.)

OR

2. _____ **I HAVE BEEN** convicted** of committing a felony* or misdemeanor* (not including a misdemeanor traffic infraction.) Information specifying the felony or misdemeanor for which I was convicted is as follows:

Conviction(s) _____

Court(s) _____

Date(s) _____

- A person is deemed to have been convicted of committing a felony or misdemeanor if such person has been convicted under the laws of any other state, the United States, or any territory subject to the jurisdiction of the United States, of an unlawful act which, if committed within this state, would be a felony or misdemeanor.

** "Convicted" means a conviction by a jury or by a court and shall also include the forfeiture of any bail, bond, or other security deposited to secure appearance by a person charged by a person having committed a felony or misdemeanor, the payment of a fine, a plea of nolo contendere, and the imposition of a deferred or suspended sentence by the court.

I HEREBY AFFIRM THAT ALL INFORMATION ON AND WITH THIS OATH IS TRUE AND COMPLETE. I UNDERSTAND THAT ANY MISREPRESENTATION OF FACTS MAY RESULT IN MY TERMINATION AND THAT FALSIFICATION OF STATEMENTS ON AND WITH THIS ATTESTATION MAY BE PUNISHABLE BY LAW.

SIGNATURE OF APPLICANT
(To be signed in the presence of a Notary Public)

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 20____
WITNESS MY HAND AND OFFICIAL SEAL.

My commission expires ____/____/____

Notary Public

Address

City, State, Zip Code