

BOULDER ELEMENTARY

Substitute Teaching Application PO Box 1346, Boulder MT 59632 Phone: (406)225-4206 Fax: (406)225-9218

PERSONAL DATA:										
Name:										
Address:										
Permanent Ad	dress:									
Phone:()										
TEACHING P	REFERENCES: Please rank	three of the followi	ing using "1"	to indica	ate your first preference	<u>,</u>				
Elementary/ K-3 4-6 7-8 Mathema Science Social Sti English Foreign L	atics udies	☐ Physical Ed☐ Music☐ Technolog☐ Library☐ Title I☐ Art☐ Counselor☐ Special Ed☐	У	elf Conta	ined □Inclusive □Col	mbination of Both				
LICENSURE/CERTIFICATION:										
Do you hold a	Montana Certificate/License	? Folio Num	ıber:	(Class: Level:					
Please list yo	our Endorsements:									
Number	Area	College Credits in this area	Number		Area College Credi in this area		>			
EDUCATION: List most recent first.										
Attendance Dates	School/Lo	ocation	Deg	ree	Credits Earned	G.P.A.				
PREFERENCES: Please attach a copy of your DD 214.										
Are you a Vete	eran? Dates of Service	ce: Pleas	e list your m	ilitary du	ties:					

EMPLOYMENT EXPERIENCE: List most recent position that required certification and was under a teaching contract, first. DO NOT include substitute teaching, aide or paraprofessional experience or student teaching. **Employment Dates Employer Name Grades & Subjects Address & Phone Taught Teaching Experience Substitute Experience Most Recent Work Experience** REFERENCES: Please list two. Name Phone **Address** Occupation **CHILD SAFETY:** Have you, within the past seven years, been released from prison or been convicted of any form of violence, such as assault, rape, child abuse, child molestation, extortion, blackmail, or any offense that involves drugs, embezzlement, fraud, stealing, or robbery? _____ If yes, please attach a separate sheet explaining the nature, place and date of the crime. Do you consent to a fingerprint/background check as required by state and federal laws for employment in a school district? Does OPI have your fingerprint/background check on file? Initial here to indicate you understand, that if there is a cost involved in obtaining your fingerprint/background check, it will be deducted from your first paycheck:_____. **RELEASE OF LIABILITY** I hereby authorize Boulder Public Schools to inquire as to my record with any or all of my former and/or current employers or references with no liability arising there from. I thereby guarantee the above information is true. I understand misrepresentation or omission of facts called for is cause for dismissal. Signature Date **Supplemental Items Attached:** Letter of Interest **Transcripts** Copy of Certificate/License Resume Placement File or at least three letters of reference Explanation Letter (if necessary) Other: