Name ________________________________

Telephone number ______________________

E-mail address __________________________

Date _________________________________

SUBSTITUTE TEACHER DUTY SHEET

Please check the following subjects you feel qualified and comfortable substitute teaching.

___ General classroom K-5

___ Music

___ Computers

___ Physical Education

___ Library

---- Spanish

___ Substitute for Instructional Assistant

___ Extended Day (before and after school, vacation programs)
**APPLICATION FOR EMPLOYMENT**

An Equal Opportunity Employer
(Application will remain active for 30 days)

**Position Applied For:**

**Referral Source:**

**Name:**
- Last
- First
- M.I.

**Address:**
- Street
- City
- State
- Zip

**E-Mail Address:**

**Phone:** (____)  

---

**Are you at least 18 years of age?**
- [ ] Yes
- [x] No

**Are you a U.S. Citizen or legally authorized to work in the U.S.?**
- [ ] Yes
- [x] No

**Date you are able to start work:**

**May we contact your current employer?**
- [ ] Yes
- [x] No

**Are you on layoff status or subject to recall elsewhere?**
- [ ] Yes
- [x] No

**Pay Expected:** $________ ________ per ________

**If hired, how long do you plan to continue working for the company?**

**Do you wish to work:**
- [ ] Full-time
- [ ] Part-time
- [ ] Temporary

**Are you willing and available to work?**
- [ ] Days
- [ ] Evenings
- [ ] Nights
- [ ] Overtime
- [ ] Weekends
- [ ] Holidays

**If applying for a job that requires one, do you have a valid driver’s license?**
- [ ] Yes
- [x] No

**Do you smoke?**
- [ ] Yes
- [x] No

**Have you been convicted of a felony or misdemeanor?**
- [ ] Yes
- [ ] No

**If so, explain:**

---

* A “yes” answer will not necessarily bar applicant from employment.

**Have you previously applied with us?**
- [ ] Yes
- [x] No

**When**

**Have you previously worked with us?**
- [ ] Yes
- [x] No

**When**

**Are any of your records under a different name?**
- [ ] Yes
- [x] No

**If so, what name**

**Do you have any relatives working for us?**
- [ ] Yes
- [x] No

**If so, who**

**Is there any reason you might be unable to meet our attendance requirements?**
- [ ] Yes
- [x] No

**If yes, please explain:**

---

---

**EDUCATION/TRAINING**

<table>
<thead>
<tr>
<th>Name and Location of School</th>
<th>Did You Graduate?</th>
<th>Subjects Studied</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School</td>
<td></td>
<td></td>
</tr>
<tr>
<td>College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Training</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Are you taking or do you plan to take any additional education?**

If so, what?

**SKILLS / ABILITIES:**

List any machines you are skilled in using:

---

List any skills or abilities you have which are pertinent to the position, including hobbies or related interests:

---

(over)
JOB REQUIREMENTS

Will you be able to perform the essential functions of the job, with or without reasonable accommodation?
☐ Yes  ☐ No

PLEASE LIST WORK EXPERIENCE, INCLUDING MILITARY AND VOLUNTEER EXPERIENCE

Present or Last Employer:

<table>
<thead>
<tr>
<th>Address</th>
<th>Phone: ( )</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start Date:</td>
<td>Leaving Date:</td>
</tr>
</tbody>
</table>

Job Title & Duties:

Why Did You Leave?

Previous Employer:

<table>
<thead>
<tr>
<th>Address</th>
<th>Phone: ( )</th>
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<tr>
<td>Start Date:</td>
<td>Leaving Date:</td>
</tr>
</tbody>
</table>

Job Title & Duties:

Why Did You Leave?

PERSONAL REFERENCE

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone: ( )</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>How Long Known:</td>
</tr>
</tbody>
</table>

Occupation:

PLEASE READ EACH OF THE FOLLOWING ITEMS BEFORE SIGNING THIS APPLICATION

1. As a final step in the hiring process, an applicant may be subject to an employment entrance exam that may include screening for illegal drugs. Applicants who confirm positive on drug screening will not be considered for employment. If a job offer is made, it may be made contingent upon the successful passing of a physical.

2. I CERTIFY that the facts contained in this application are true and complete, and understand that if employed, false, misleading or incomplete statements on this application shall be grounds for immediate dismissal.

3. I AUTHORIZE the company to investigate and verify any information contained in my application or pre-hire interviews, including my previous employment, education and background. I further release all parties from all liability for any damage that may result from furnishing or receiving such information.

4. I UNDERSTAND and agree that my employment and compensation may be terminated at any time without prior notice, with or without reason, at the option of the company or myself, and understand that no representative of the company, other than the President, has authority to enter into any agreement contrary to the foregoing.

5. I UNDERSTAND that all company property must be returned and any indebtedness to the company must be paid on or before my last day of work. I authorize the company to deduct from my final paycheck an amount necessary to satisfy any unpaid obligation.

Date __________________ Signature of Applicant

Washington Employers Association
October 2005
Meridian School

WAIVER

I hereby authorize Meridian School to contact references about my work experience and to verify my background, including information given by me. This includes all checks of my background as allowed by law including, but not limited to, discussions with supervisors, co-workers, friends, business associates, education administrators, or other individuals that Meridian School, in its sole discretion, believes may have relevant information regarding my suitability for employment. I further authorize Meridian School to perform the following checks on my background:

Washington State Criminal Background Check
Fingerprint Check

I agree not to assert any claims or causes of action of any kind against Meridian School, its agents, its employees, or any individual contacted by Meridian School, arising out of the Meridian School's investigation and review of information. I further release and forever discharge Meridian School, its agents, its employees, and the individuals and companies contacted by Meridian School as part of its investigation, from any and all claims, demands, damages, actions, causes of action, or suits of any kind or nature whatsoever arising from the Meridian School's investigation of my background. I acknowledge that Meridian School has made no representations of any kind as to whether employment will be offered at the conclusion of its investigation.

I understand that if reference checking reveals false or misleading information given by me, it will be grounds for not hiring me, or if already hired, for immediate dismissal.

Applicant Signature: ____________________________________________

Date: __________________________
<table>
<thead>
<tr>
<th>LAST NAME</th>
<th>FIRST NAME</th>
<th>MIDDLE NAME</th>
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<table>
<thead>
<tr>
<th>PLACE OF BIRTH (CITY &amp; STATE)</th>
<th>CITIZENSHIP</th>
<th>SOCIAL SECURITY NO.</th>
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<tbody>
<tr>
<td></td>
<td>USA</td>
<td></td>
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<tr>
<td></td>
<td>OTHER</td>
<td></td>
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<tr>
<td>(Country of Citizenship)</td>
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</table>

<table>
<thead>
<tr>
<th>DATE OF BIRTH</th>
<th>SEX</th>
<th>RACE</th>
<th>HEIGHT</th>
<th>WEIGHT</th>
<th>HAIR COLOR</th>
<th>EYE COLOR</th>
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<thead>
<tr>
<th>ARMED FORCES NUMBER:</th>
<th>OCA NUMBER:</th>
<th>FBI NUMBER:</th>
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<tr>
<th>ANY DISTINGUISHING MARKS:</th>
<th>ALIASES (AKA):</th>
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<tbody>
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<table>
<thead>
<tr>
<th>CURRENT RESIDENCE:</th>
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<tbody>
<tr>
<td>STREET:</td>
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<table>
<thead>
<tr>
<th>CITY:</th>
<th>ZIP:</th>
<th>TEL:</th>
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<tr>
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<table>
<thead>
<tr>
<th>EMPLOYER:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
</tr>
<tr>
<td>Address:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City:</th>
<th>State:</th>
<th>Zip:</th>
<th>Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seattle</td>
<td>Wa</td>
<td>98103</td>
<td>206 432-7154</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>REASON FOR BEING FINGERPRINTED:</th>
</tr>
</thead>
<tbody>
<tr>
<td>substitute teacher</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>Number of Fingerprint Cards Requested:</th>
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<tbody>
<tr>
<td>2</td>
</tr>
</tbody>
</table>

(Up to 2 cards $10.00. Each additional card is $3.00)

<table>
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<tr>
<th>SIGNATURE</th>
<th>DATE</th>
</tr>
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</table>