

**Vinton-Shellsburg Community School District**

**SUPPORT PERSONNEL SUBSTITUTE APPLICATION**

Date:	Days/Hours Available for Work	Telephone Number	<b>Willing to Substitute- Specify Area(s)</b>  <input type="checkbox"/> Teacher Associate  <input type="checkbox"/> Secretary  <input type="checkbox"/> Food Service  <input type="checkbox"/> Custodian  <input type="checkbox"/> Summer Custodial  <hr/>
Name (Last, First & Middle Initial)	Date Available for Employment	Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address (Street)	Are you legally able to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a Military Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	
(City, State, Zip Code)	Do you have any health-related conditions that might interfere with your ability to safely and efficiently perform all duties of the job for which you are applying?  <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Please Explain --		
Social Security Number	Have you ever been convicted of a crime? Explain.  <input type="checkbox"/> Yes <input type="checkbox"/> No		
E-Mail Address:			

**Education**

<b>Circle Highest Grade Completed</b>  6 7 8 9 10 11 12 GED	Do you have any other experience or qualifications not listed which relate to the job applied for? List any office equipment or industrial machines or equipment you operate.
<b>Name &amp; Location of High School:</b>  College 1 2 3 4 5 6	Have you received any additional training – workshops, short courses, volunteer work, etc.? (Use back of this form if necessary.)
<b>Name of College:</b>	

**Employment History – You must list Contact Phone Numbers**

Employer Name & Phone #, Address (City, State, Zip)	Date Started	Date Left	Job Title
	Reason for Leaving:		Job Duties:
Employer Name & Phone #, Address (City, State, Zip)	Date Started	Date Left	Job Title
	Reason for Leaving:		Job Duties:
Employer Name & Phone #, Address (City, State, Zip)	Date Started	Date Left	Job Title
	Reason for Leaving:		Job Duties:

Character Reference (List Two)	Address	Phone #
1.		
2.		

I hereby certify that the information on this application is true and a complete statement of my personal and professional record to date. I authorize the District to consult previous and present employers and give permission to conduct a criminal history record check.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Return application to: Vinton-Shellsburg Comm. Schools, 1502 C Ave., Vinton, IA 52349  
Phone: 319.436.4728 ext. 9102**

**VINTON-SHELLSBURG COMMUNITY SCHOOL DISTRICT EQUITY STATEMENT**

The Vinton-Shellsburg Community School District provides equal educational and employment opportunities and will not illegally discriminate on the basis of age, race, creed, color, sex, national origin, religion, marital status or disability. Vinton-Shellsburg Community School District shall take affirmative action in recruitment, appointment, assignment and advancement of women and men, minorities and disabled. Inquiries regarding compliance with equal educational or employment opportunities and/or affirmative action shall be directed to Sheila Wendel the Equity Coordinator, Vinton-Shellsburg CSD, 1502 C Avenue, Vinton, Iowa 52349. Inquiries may also be directed in writing to the Director of the Region VII Office of the United States Equal Employment Opportunities Commission, or the Director of the Region VII Office of Civil Rights, United States Department of Education in Chicago, IL.

***Additional Comments***

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