

**PREBLE COUNTY EDUCATIONAL SERVICE CENTER**  
 597 Hillcrest Drive, Eaton, Ohio 45320-9510 – (937) 456-1187  
**APPLICATION FOR SUBSTITUTE TEACHING**

<b>Name:</b> _____ <small>PLEASE INCLUDE FIRST NAME, MIDDLE INITIAL, AND LAST NAME</small>	<b>Phone:</b> (    ) _____ <b>Cell:</b> (    ) _____ <b>Please write numbers legibly</b>
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**Email Address:** \_\_\_\_\_

<b>Street:</b> _____	<b>City:</b> _____	<b>State:</b> _____	<b>Zip:</b> _____
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Ohio School District of Residence: _____	County: _____
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Social Security Number: _____	Date of Birth:    /    /
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**CERTIFICATION/LICENSURE INFORMATION:**

Subject area shown on certificate/license: \_\_\_\_\_

Certificate/License No.: _____	Expiration Date: _____
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Indicate **grade levels you prefer** to teach: \_\_\_\_\_

**I am available** to substitute every day of the week:     Yes     No **(check days of availability below)**

*My days of availability are limited to:* Mon.  Tues.  Wed.  Thurs.  Fri.

I am willing to substitute for the following **special classes:** Art  Music  Phys. Ed.  Spec. Ed.

Please call me for substituting in the following districts: **(To substitute in Eaton Community Schools call 937-456-1107)**

<input type="checkbox"/> National Trail Local School District	<input type="checkbox"/> Preble Shawnee Local School District
<input type="checkbox"/> Tri-County North Local School District	<input type="checkbox"/> Twin Valley Community Local School District

**Preble County Educational Service Center** (Programs listed below – select classrooms where you would substitute)

<input type="checkbox"/> Preble County <b>Preschool</b>	<input type="checkbox"/> Preble County <b>Multi-Disability (MD)</b> Classrooms
<input type="checkbox"/> Preble County <b>Alternative Classroom (night class for at risk high school students)</b>	<input type="checkbox"/> <b>Emotionally Disturbed (ED)</b> (formerly SBH) in West Alexandria

**APPLICANT'S STATEMENT**

I CERTIFY THAT THE ANSWERS GIVEN ON THIS APPLICATION, AS WELL AS THE INFORMATION CONTAINED IN ANY TRANSCRIPT, CERTIFICATE/LICENSE, OR ADDITIONAL INFORMATION I SUBMIT, ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. FURTHERMORE, PERMISSION IS HEREBY GRANTED TO THE ABOVE LISTED SCHOOL DISTRICTS, BY THE UNDERSIGNED, TO CONDUCT REFERENCE, EDUCATION, EMPLOYMENT, AND ANY OTHER AGENCY CHECKS AS THEY MAY COLLECTIVELY OR INDIVIDUALLY FEEL ARE NECESSARY TO CONSIDER ME FOR EMPLOYMENT WITH THE SCHOOL DISTRICT. IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT ANY FALSE AND MISLEADING INFORMATION GIVEN IN MY APPLICATION, TRANSCRIPTS, CERTIFICATE/LICENSE, OR ADDITIONAL INFORMATION OR INTERVIEW(S) MAY RESULT IN DISCHARGE. I ALSO UNDERSTAND THAT MY EMPLOYMENT IN THE SCHOOL DISTRICTS LISTED ABOVE IS CONDITIONED UPON THE COMPLETION OF A CRIMINAL RECORD CHECK ACCEPTABLE TO THE BOARD OF EDUCATION OF SUCH DISTRICT. IF THE CRIMINAL RECORD CHECK SHOULD PROVE TO BE UNACCEPTABLE TO THE GOVERNING BOARD OF EDUCATION FOR ANY REASON, I UNDERSTAND THAT MY EMPLOYMENT MAY BE TERMINATED AT THE WILL OF THE GOVERNING BOARD OF EDUCATION WITHOUT ANY TYPE OF HEARING OR STATEMENT OF REASONS FOR SUCH ACTION DURING MY FIRST YEAR OF EMPLOYMENT.

_____	_____
Signature of Applicant	Date

THESE DOCUMENTS MUST BE ON FILE AT THE PREBLE COUNTY EDUCATIONAL SERVICE CENTER BEFORE YOU WILL BE PLACED ON THE SUBSTITUTE TEACHER LIST.

- 1) **TEACHING CERTIFICATE/LICENSE**
- 2) **OFFICIAL TRANSCRIPTS of Bachelor's Degree**
- 3) **RESULTS OF CRIMINAL BACKGROUND CHECKS (BCI & FBI)**

Revised: 9/09