

Preferences and Availability (Check all that apply):

_____ PK, Elementary, and High School _____ PK _____ Elementary _____ High School

Days I am available to sub (circle all that apply): M T W Th F

Employment History:

| From Mo/Yr | To Mo/Yr | Employer Name/Location | Position | Supervisor | Phone Contact |
|------------|----------|------------------------|----------|------------|---------------|
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By signing this application, I understand that the administration of the Fairfax R-3 School District may do a Child Abuse/Criminal Record Check on me. My employment as a substitute teacher is contingent upon a satisfactory Child Abuse/Criminal Record Check.

By signing this application, I understand that I must have a background check from the Missouri State Highway Patrol prior to employment with the Fairfax R-3 School District and that this background check is paid for by the applicant.

By submitting this application, I agree to be available as a substitute teacher in the Fairfax R-3 School District until I inform the District in writing that I wish to be removed from the substitute list.

By signing I acknowledge that, if hired, I agree to abide by District policies, rules and regulations.

By signing I attest that the information in this application is true.

Applicant Signature

Date of Application

Return to: Office of the High School Principal
 Fairfax R-3 School District
 500 Main Street
 Fairfax, Mo. 64446