

P. O. Box 705

**JACKSON PARISH SCHOOL BOARD**

Jonesboro, LA 71251

Phone: (318) 259-4456

**APPLICATION FOR SUBSTITUTE TEACHER**

Name \_\_\_\_\_

Date \_\_\_\_\_

Address \_\_\_\_\_

S.S. # \_\_\_\_\_

\_\_\_\_\_

Phone # \_\_\_\_\_

**EDUCATION**

\_\_\_\_\_ Bachelors Degree in Education (attach copy of certificate)

\_\_\_\_\_ College Graduate (Degree in other area - attach a copy.)

\_\_\_\_\_ 1 - 3 years college (attach grades)

\_\_\_\_\_ High School graduate What school? \_\_\_\_\_ (Copy of diploma)

\_\_\_\_\_ Other (Explain) attach a copy

**EMPLOYMENT HISTORY**

Employer	Address	Dates	Position/Duties
		to	
		to	
		to	
		to	
		to	

**REFERENCES**

Name	Address	Position

I am available to substitute (check one or more)

\_\_\_\_\_ Part day

\_\_\_\_\_ Day to day basis

\_\_\_\_\_ Assignments of two weeks or more

**I understand that I serve at the discretion of the Jackson Parish School System and that I may be removed from the list of approved substitutes at any time. I also understand that falsification of the information given on this application will result in my immediate removal from the list of approved substitutes.**

**Have you ever been convicted of a crime or felony?    \_\_\_ yes    \_\_\_ no**

**Are you retired from a Louisiana retirement system?    \_\_\_ yes    \_\_\_ no**

All applications are kept on file for a period of two years.

\_\_\_\_\_  
**Applicant's Signature**