

WINDHAM SOUTHWEST SUPERVISORY UNION

Office of the Superintendent of Schools

1 School Street

Wilmington, VT 05363

802-464-1300

wssu@sover.net

Halifax Readsboro Searsburg Stamford Whitingham Wilmington

Substitute Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Mailing address (if different from above)

Phone: _____ Email _____

Preferences:

Schools: TVES (PrK-5) TVMHS (6-12) Halifax (K-8) Readsboro (K-8) Stamford (K-8) All

Grade Level(s): K-5 6-8 9-12 All

Days Available M T W TH F All

Subjects: Math Science English/LA Social Studies Specials (PE, Art, Music) Para (**Must be HQ**)

Custodian Office Staff Cafeteria All

School Nurse- *RN and CPR certification is required, and copy of certification must be provided with application*

Note/Comments: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for the WSSU or any of the schools in the District? YES NO If yes, when? _____

& school worked for _____

Have you ever been convicted of a crime other than a minor traffic violation? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Related Experience

1. School: _____ Start date _____ End Date _____

Job Title: _____

Responsibilities: _____

2. School: _____ Start date _____ End Date _____

Job Title: _____

Responsibilities: _____

3. School: _____ Start date _____ End Date _____

Job Title: _____

Responsibilities: _____

Disclaimer and Signature

I understand that the District shall have the right to conduct a criminal record check with the Vermont Criminal Information Center (VCIC) and at a minimum will conduct a Vermont Sex Offender Registry check.

In the event the District receives notice of a criminal record, I understand that within 30 days of receiving the results of the record check, I have the right to appeal the finding to the Vermont Criminal Information Center, Department of Public Safety, 103 South Main Street, Waterbury, VT 05671-2101."

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

It is the policy and intent of the Windham Southwest Supervisory Union that no person shall be discriminated against because of color, race, gender, national origin, sexual orientation or on the basis of being handicapped, but otherwise qualified individual.