## **Linn County R-1 Public School**

Substitute Application

Complete and return this application to:

Linn County R-1 School District P. O. Box 130 Purdin, Missouri 64674

|          |  | Name   |   |  | Social   | Security #                                      |
|----------|--|--|---|--|--|---|
| <u>-</u> |  | Present Addres   | SS  |  | Tele   | phone   |
|          | <del></del>  | Permanent Add  | ress  |  | Tel  | ephone  |
|          | List Missouri<br>teaching certificates<br>(type & area)  |  |   |  |  |   |
|          | Have you previously bee  | n employed by the  | e Linn R-I Distric  | t? yes/no  | Date   |   |
|          | Were you in the U.S. Arr   | med Forces yes   | s/no  | Branch   | Length of serv   | /ice  |
| *<br>3   | Are you currently under a If so describe in  | the care of a Doct<br>full (use back of  |   | ·)   |  |   |
|          | Have you ever been convicted of a felony?  If so describe in full (use back of page if necessary)  Failure to adequately disclose all relevant information is grounds for dismissal from employment. |  |   |  |  |   |
|          | If so describe in  | full (use back of  | page if necessary   |  | missal from employme                                     | nt.   |
| UCA      | If so describe in<br>Failure to adequ<br>ATION QUALIFICATION<br>Institution  | full (use back of nately disclose all n  | page if necessary<br>relevant informat<br>ies or colleges yo  | ion is grounds for dis<br>ou attended, in chrono<br>Year of  | logical order  | Sem Hrs   |
| UCA      | If so describe in<br>Failure to adequ  | full (use back of nately disclose all n  | page if necessary<br>relevant informat  | ion is grounds for dis   | -  |   |
| UCA      | If so describe in<br>Failure to adequ<br>ATION QUALIFICATION<br>Institution  | full (use back of nately disclose all n  | page if necessary<br>relevant informat<br>ies or colleges yo  | ion is grounds for dis<br>ou attended, in chrono<br>Year of  | logical order  | Sem Hrs   |
|          | If so describe in<br>Failure to adequ<br>ATION QUALIFICATION<br>Institution  | full (use back of nately disclose all n  | page if necessary<br>relevant informat<br>ies or colleges yo  | ion is grounds for discurate attended, in chrono Year of Graduation  | logical order  | Sem Hrs<br>Credit                               |
|          | If so describe in Failure to adequation QUALIFICATION Institution Name/Location  EXPERIENCE:   | full (use back of nately disclose all n  | page if necessary relevant informat ies or colleges yo  Degree                                      | ion is grounds for discurrence of Graduation  Dates of   | logical order  Major                                     | Sem Hrs<br>Credit                               |
|          | If so describe in Failure to adequation QUALIFICATION Institution Name/Location  EXPERIENCE:   | full (use back of nately disclose all n  | page if necessary relevant informat ies or colleges yo  Degree                                      | ion is grounds for discurrence of Graduation  Dates of   | logical order  Major                                     | Sem Hrs<br>Credit                               |
| ORK      | If so describe in Failure to adequation QUALIFICATION Institution Name/Location  EXPERIENCE:   | a full (use back of nately disclose all nately | page if necessary relevant informat ies or colleges yo  Degree  Position                            | ion is grounds for discount attended, in chronolyear of Graduation  Dates of Employment  | logical order  Major                                     | Sem Hrs<br>Credit                               |
| ORK.     | If so describe in Failure to adequation QUALIFICATION Institution Name/Location  EXPERIENCE: Location  | full (use back of pately disclose all surveys)  NS: List universit  formation which I  | page if necessary relevant informaties or colleges yo  Degree  Position  have provided is           | ion is grounds for discount attended, in chronolyear of Graduation  Dates of Employment  true and correct.  Signature:   | Major  Major  Name of Supervisor                         | Sem Hrs Credit  Phone                           |
| DRK.     | If so describe in Failure to adequation QUALIFICATION Institution Name/Location  EXPERIENCE: Location  | full (use back of pately disclose all section which I bate:  | page if necessary relevant informaties or colleges yo  Degree  Position  Position  have provided is | Dates of Employment  true and correct.  Signature:  1964 (as amended), Exercise of the content o | Major  Major  Name of Supervisor  ecutive Order 11246, S | Sem Hrs Credit  Phone  Phone  ec.402 of the Vie |