

**Linn J4 School District/Traver School
Substitute Teacher Application Form**

Contact Person: Allyssa Andersen, District Administrator
W3490 Linton Road
Lake Geneva, WI 53147
(262) 248-4067

The Linn Joint 4 School District is an equal opportunity employer. Qualified applicants will receive equal consideration. No question is asked for the purpose of unlawfully excluding any qualified applicant by reason of age, race, creed, color, handicap, sex, national origin, ancestry, arrest record, conviction record, religion, or political affiliation.

An application shall be considered complete when the following have been received:

1. This completed application form, and
2. A copy of your Wisconsin Teaching license.

PERSONAL DATA

Full Name: _____

Current address: _____

Mailing address (if different): _____

Best phone number to reach you: _____

Email address: _____

Social Security number: _____

EDUCATION - Please list colleges attended

Name/Location	Dates Attended		Degree	Major/ Minor
	From	To		

CERTIFICATION - Please attach a copy of your current Wisconsin certification/license

Have you ever had a professional certificate or license revoked?

If YES, please explain. _____ Yes _____ No

PROFESSIONAL EDUCATIONAL WORK EXPERIENCE

From	To	Total Years	District/School	Position	Principal/ Supervisor

We would be grateful if our subs would be willing to work with any grade level. However, we understand if that is not the case. Please indicate if there are any subject areas or grade levels in which you would *not* feel comfortable.

Are you available for same-day work (the early morning call)? _____

CERTIFICATION STATEMENT. Please read, sign and date the following statement.

I certify that I have fully read this application form, that all answers to questions in this application are true and complete to the best of my knowledge, and I agree that my misstatements or omissions of material fact may disqualify me for this position. A criminal background check will be performed before an applicant is offered a position.

Signature: _____ Date: _____