



# CALANES UNION HIGH SCHOOL DISTRICT

1212 Pleasant Hill Rd, Lafayette, California 94549 • (925) 280-3900 • Fax (925) 280-4282 • www.acalanes.k12.ca.us

## Application For Substitute Teaching Position

### HR Use Only

- Application
- Resume
- Transcripts
- 2-LOR
- Credential
- CBEST
- Cover Letter

*We educate every student to excel and contribute in a global society.*

Substitute

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Date \_\_\_\_\_  
 Home Phone (\_\_\_\_) \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 Cell Phone (\_\_\_\_) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Have you passed the CBEST? Yes  No  Email \_\_\_\_\_  
 Date available for employment \_\_\_\_\_

	Yes	No
Have you ever been convicted of any offense, felony or misdemeanor, other than a minor traffic violation that did not result in suspension or revocation of driver's license? If yes, provide an explanation. (Attach Sheet)	<input type="checkbox"/>	<input type="checkbox"/>
Do you now have charges pending against you which have not been adjudicated? If either is yes, provide an explanation. (Attach Sheet)	<input type="checkbox"/>	<input type="checkbox"/>

Specific Title of California Credential	Other Subject Authorizations Endorsed on Your Credential	Major	Minor	Expiration Date

If you hold an out-of-state credential, list state and type: \_\_\_\_\_

Are your fingerprints on file with **this** District? Yes  No  If yes, when were they taken? \_\_\_\_\_

Has your credential ever been suspended or revoked? Yes  No  If yes, please attach an explanation.

Have you ever been discharged or asked to resign from a position? If yes, please attach explanation. Yes  No

If you do not currently possess a California teaching credential have you made application for one? Yes  No

Credential applied for: \_\_\_\_\_ Date applied for: \_\_\_\_\_

Applied through (name of college or office): \_\_\_\_\_

If you have not applied for a credential, do you anticipate applying for one? Yes  No

Date intending to apply: \_\_\_\_\_ Type of credential for which you intend to apply: \_\_\_\_\_

Total years teaching experience (not including student or substitute teaching) Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Are you or have you ever been a member of the California State Teachers' Retirement System Yes  No

<b>Teaching Experience</b> (List most recent first. Indicate type-regular, substitute or student teaching).				
Type (Reg, Sub)	District	School	Grade/Subject	Dates

<b>Professional References</b> (Include only those who have knowledge of your teaching experience.)			
Name/Position	Address	Email	Telephone

<b>College or University Education</b> (List most recent first.)			
College or University	City/State	Major/Degree	Date

Number of semester units of graduate work beyond BA/BS degree: \_\_\_\_\_

Do you have an MA/MS/MEd?    Yes     No     Do you have an EdD/PhD/JD?    Yes     No

**Please include the following in your application packet:**

- Cover Letter
- Resume
- Transcripts (copies are acceptable for application process)
- Two letters of reference or placement file
- Copy of credential(s)
- Copy of CBEST

Applicants who are finalists for specific positions will be contacted by the District for interviews. Applicants must hold or be able to qualify for the appropriate certificate by the beginning date of employment.

I hereby certify that all statements made in this application are true and correct to the best of my knowledge. Falsification of any information on this application may be grounds for disqualification or dismissal. I hereby authorize all previous employers and listed references to give any and all information regarding my employment, plus any other information from personal knowledge or records. I release from all liability persons and organizations reporting information required by this application.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Return COMPLETE applications to:**

Department of Human Resources  
Acalanes Union High School District, 1212 Pleasant Hill Road, Lafayette, CA 94549

**[Only hard copy applications will be accepted]**

**Department of Human Resources**

**AUTHORIZATION TO ACQUIRE INFORMATION FROM REFERENCES**

**THIS AUTHORIZATION MUST BE SUBMITTED WITH YOUR APPLICATION**

It is the policy of the Acalanes Union High School District to conduct reference checks for all candidates for employment. Reference checking is generally conducted after the interview portion of the selection procedure, and three references are normally obtained before the candidate is offered employment. Occasionally the District conducts reference checks prior to inviting candidates to participate in an interview.

Your signature below indicates your agreement with and acknowledgement of the following:

As an applicant for an employment position with the Acalanes Union High School District, I authorize my current and past employers and work associates, including but not limited to supervisors, colleagues, and subordinates to release to the Acalanes Union High School District any reference information in my personnel records or file (including but not limited to transcripts, certificates, credential, etc.) and information related to my work-related personal characteristics (including, but not limited to, character, dependability, honesty, integrity, ability to work under pressure, interpersonal skills, general physical ability, and reputation among co-workers).

I expressly and without reservation waive my rights to review the information collected in the reference checks.

The Acalanes Union High School District will maintain reference information in strictest confidence and solely for the purpose of evaluating my qualifications for the position. Information obtained during reference checks will not be provided to anyone outside the selection process.

A photocopy of this signed authorization is to be considered valid as an original.

**In executing this authorization, I fully and completely release all present and past employers and their employees, the Acalanes Union High School District and its employees, and all other persons and entities from liability for any damage, including to the full extent allowed by law, under California Civil Code Sections 45 and 46 and California Labor Code Section 1054, or any similar laws of other states or political entities, which may result from furnishing information, which I am permitting to be released by way of this authorization.**

**I have carefully read and understand all of the provisions of this authorization and have voluntarily and without coercion or duress agreed to and signed this authorization.**

\_\_\_\_\_  
Candidate's full name (print)

\_\_\_\_\_  
Other last names you have used (if any)

\_\_\_\_\_  
Candidate's signature

\_\_\_\_\_  
Date