

North Iowa Community School District

Substitute Teacher Application

NAME (F,M,L) _____ DATE _____

ADDRESS _____

PHONE _____ SOCIAL SECURITY _____

E-MAIL ADDRESS _____

COLLEGE/UNIVERSITY, ETC.

Name of School	Major	Dates Attended	Date Graduated	Degree

TEACHING EXPERIENCE (If no contract experience, list student teaching and indicate such.)

Name/Location of School	Grade/Subject	Dates Taught	Total Years

REFERENCES (If possible, list at least one local reference)

Name	Telephone	Title	Relation to your work

CHECK your teaching preferences:

K-6 Exceptions _____
 7-8 Exceptions _____
 9-12 Exceptions _____

Do you have other responsibilities that would interfere with your taking an assignment when called to substitute?

If so, explain:

RETURN this application with the information listed below to:

Business Manager, P.O. Box 510, 111 3rd Ave. NW, Buffalo Center, Iowa 50424

Please include a copy of IOWA Teacher's Certificate and Copy of Mandatory Reporter Training Certificate
Completed background check required prior to hiring.

An affirmative Action, Equal Opportunity Employer

The North Iowa Community School District does not discriminate based on race, creed, color, sex, sexual orientation, gender identity, national origin, religion, age, marital status, socioeconomic status, or disability. Inquiries may be directed to the Director of Human Resources, 111 3rd Ave. NW, Buffalo Center, Iowa 642-562-2525