SPERRY PUBLIC SCHOOLS

400 WEST MAIN STREET SPERRY, OK 74073 DR. BRIAN BEAGLES, SUPERINTENDENT (918)288-7213

APPLICATION FOR SUBSTITUTE EMPLOYMENT

NOTICE TO APPLICANT:

Independent School District Number 008, of Tulsa County, Oklahoma, does not knowingly discriminate against any employee or applicant for employment on the basis of race, color, religion, sex, age, national origin, handicap, or status as a Vietnam era or disabled veteran. This policy encompasses recruitment, selection, assignment, promotion, transfer, termination, compensation, training and apprenticeship, and all other terms, conditions, benefits and privileges associated with employment. This policy also extends to the educational programs and activities operated by the District.

Discrimination is specifically prohibited by Title IX of the Education Amendments of 1972, as amended, and Title 45, Subtitle A, Part 86, of the implementing regulations administered by the Director of the Office of Civil Rights of the United States Department of Health, Education, and Welfare.

DATE:			
Last Name:	First Name:	Middle Initial:	
Street Address:	City		Zip
Telephone Number:	•		-
Social Security Number			
Have you ever been convicted of a	felony or are any felony charges	pending against you?	
Certified Cert	ificate Number:	Non Certified	
SUBSTITUE TEACHING PREF	ERENCE: NON-TEACH	HING PREFERENCES:	
LOWER ELEMENTARY (K-2)	BUS DRIVER	R (MUST HAVE CDL)	
UPPER ELEMENTARY (3-5)	CAFETERIA		
MIDDLE SCHOOL (6-8)	CUSTODIAL		
HIGH SCHOOL (9-12)	NO PREFERI	ENCE	
NO PREFERENCE			
List any special area of interest/ tra	ining (ex: art, computers, office	machinery, etc.)	

EDUCATION

NAME & LOCATION OF SCHOOL	YEAR OF COMPLETION DEGREE OR DIPLOMA	
HIGH SCHOOL		
UNDERGRADUATE		
GRADUATE		
PREVIOUS EXPERIENCE: (LIST B WITH THE MOST RECENT.)	ELOW A COMPLETE HISTORY OF PREVIOUS EXPERIENCE. BEGIN	
NAME OF EMPLOYER	CITY & STATE DATE OF EMPLOYMENT POSITION	
REFERENCES (PLEASE DO NOT R 1.	EFER TO RELATIVES. PLEASE GIVE TWO (2) REFERENCES.)	
NAME	ADDRESS	
TELEPHONE	OCCUPATION	
2.		
NAME	ADDRESS	
TELEPHONE	OCCUPATION	
I CERTIFY THAT TO THE BEST OF ARE ACCURATE AND COMPLETE.	MY KNOWLEDGE THE FACTS SET FORTH IN MY APPPLICATION	
SIGNATURE OF APPLICANT	DATE	
PIONALOKE OF AFFEICANT	DATE	