

Voluntown Board of Education  
195 Main Street, P.O. Box 129  
Voluntown, Connecticut 06384  
Tel: (860) 376-9167  
Fax: (860) 376-3185

## APPLICATION FOR SUBSTITUTE TEACHING

Name: \_\_\_\_\_  
Last First Middle  
Address: \_\_\_\_\_  
Street City/Town State/Zip  
Telephone (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_

Are you eligible to work in the United States? Yes\_\_\_ No\_\_\_

Have you ever applied to this school system before? Yes\_\_\_ No\_\_\_

### EDUCATION:

1. \_\_\_\_\_  
High School Name & Location Years Attended Year Graduated  
2. \_\_\_\_\_  
College/University Name & Location Years Attended Year Graduated Degree  
3. \_\_\_\_\_  
College/University Name & Location Years Attended Year Graduated Degree

Do you have a valid Connecticut Teaching Certificate?\_\_\_\_\_ If yes, type: ☐ Initial ☐ Provisional  
☐ Professional

Area of Certification Held Since Applied For State Expiration

Proper certification is the responsibility of the applicant. A copy of your college/university transcripts (or proof of your degree) must accompany your application.

### EDUCATIONAL EXPERIENCE BEGINNING WITH STUDENT TEACHING (if applicable):

Nature of Position School Location Dates

Nature of Position School Location Dates

Nature of Position School Location Dates

**EMPLOYMENT HISTORY** (starting with most recent):

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If currently employed, may we contact your current employer? Yes\_\_\_ No\_\_\_

Firm:\_\_\_\_\_Address:\_\_\_\_\_  
Dates Employed:\_\_\_\_\_Position/Title:\_\_\_\_\_  
Reason for Leaving:\_\_\_\_\_

Firm:\_\_\_\_\_Address:\_\_\_\_\_  
Dates Employed:\_\_\_\_\_Position/Title:\_\_\_\_\_  
Reason for Leaving:\_\_\_\_\_

Firm:\_\_\_\_\_Address:\_\_\_\_\_  
Dates Employed:\_\_\_\_\_Position/Title:\_\_\_\_\_  
Reason for Leaving:\_\_\_\_\_

**REFERENCES:**

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1.	_____	_____	_____	_____	_____
	Name	Occupation	Address	Telephone No.	Years known
2.	_____	_____	_____	_____	_____
	Name	Occupation	Address	Telephone No.	Years known
3.	_____	_____	_____	_____	_____
	Name	Occupation	Address	Telephone No.	Years known

In signing this application, I certify that all information I have presented is true and accurate to the best of my knowledge. I understand that any misstatement or omission of information may result in denial of employment or discharge. I agree to hold harmless the Voluntown Board of Education and Administration from any liability associated with the hiring process. I authorize the references listed above to give the Voluntown Board of Education any and all information concerning my previous employment and any pertinent information that may have, personal or otherwise, and release from all liability for any damage that may result from furnishing same to you.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

*Voluntown Board of Education is an Equal Opportunity Employer.*

*Revised 09/12, 4/19*