OFFICE USE: Attach a copy of the substitute's driver's license and social security card to the back of this application.



Application for Employment: Substitute Teacher

THE GALILEO SCHOOL FOR GIFTED LEARNING IS AN EQUAL OPPORTUNITY EMPLOYER. WE DO NOT DISCRIMINATE IN HIRING BECAUSE OF AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX OR HANDICAP.

To be employed by the Galileo School as a substitute teacher, you must either apply as a substitute through Seminole County and submit your substitute number to us or apply directly through the Galileo School. If you choose the latter, you must complete the following requirements:

- 1. Be fingerprinted, at your own expense.
- 2. Complete the following application below.
- 3. Provide your social security card and driver's license to us prior to your first day of employment so that we can make a copy at the front desk.

All substitutes must complete an employment application with ACH to be eligible to be paid. Substitutes are paid at the following rates:

- \$100/day
- Subs who work half days will be paid a proportion of the above rates

Complete all parts of the form below:

Last Name	First N	Name	M.I.	Social Securit	y Number	Date
Street Address		City		State	Zip Code	
Home Phone	Cell Phone	Eı	nail Addr	ess		
SCPS Substitute Nur	nber:					
Earliest Date Availab	le for Work:					
Are you willing to we List languages that y	ork overtime? Yes	No				
	n of the United States, i	ınder what typ	oe of perm	it do you have t	he legal right t	o work in the

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List names of educational	institutions you attended	, beginning with the mo	ost recent.		
Name of <u>School/Institution</u>	<u>Location</u>	Dates Attended		Certificate, Diploma or Degree Earned	
Do you have any other exp school?	perience, knowledge, skil	or talent that you feel	qualifies you for en	nployment at the	
Please list an emergency co	ontact:				
Relation to you:	Name	Address	Phone		
		ork History ary Service as Emplo	yment)		
Employer Name	Add	<u>dress</u>	<u>Dates of</u> Employment	<u>Phone Number</u>	
1.					
2.					
3.					
4.					
5.					
List Three References (Ple	ease do not include relativ	ves)			
<u>Name</u>	Add	<u>dress</u>	<u>Length of</u> <u>Acquaintance</u>	<u>Phone Number</u>	
1.					
2.					
3.					

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SECURITY INFORMATION

NOTICE: This section must be completed. If you are offered employment, you may be required to be fingerprinted and an extensive background check will be conducted. Please answer questions truthfully. Omission of any criminal history information is grounds for non-hiring and/or immediate termination.

1.	Have you ever been convicted of an offense other than a minor traffic violation	? Yes	
	(DUI and DWI are not minor and must be reported.)		No
2.	Have you ever been convicted of, had adjudication withheld in, pled <i>nolo contendere</i> or no contest to, or entered a pre-trial intervention program for a		
	misdemeanor or felony criminal charge, or are there currently criminal charge pending against you? (If yes, attach a separate sheet with an explanation.) NOTE: Sealed or expunged records must be reported. Failure to answer this question accurately may result in termination of employment.	es Yes	No
3.	Have you ever been suspended without pay, or dismissed from employment or resigned while an investigation was in progress for possible disciplinary action?	Yes	No
If ve	s, where? When?		
	are that the answers given by me to the foregoing questions and statements are	true and correc	•t I

I declare that the answers given by me to the foregoing questions and statements are true and correct. I agree that the Galileo School for Gifted Learning shall not be held liable if my employment is terminated because of the falsity of statements, answers or omissions made by me in this application. I authorize all former employers, and any persons named above to give any information regarding my employment to the principal of the Galileo School for Gifted Learning.

Signature

Date