

**MARSH VALLEY SCHOOL DISTRICT NO. 21**  
**SUBSTITUTE TEACHER'S APPLICATION**

An Equal Opportunity / Affirmative Action Employer

Social Security Number SS# \_\_\_\_\_ Certification Number \_\_\_\_\_

Name: \_\_\_\_\_  
(Last name) (First name) (Middle)

Present Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

**School Attended**

Name & Location	Date	Degree / Diploma	Major Field	Minor Field

Schools where you will substitute if called to do so: \_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT HISTORY**

Name of Employer	Location	Description	Date

Professional and Civic Organizations and Activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

State briefly in long hand why you desire this position: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Teaching areas and activities where you are qualified to substitute: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### REFERENCES

NAME	ADDRESS	OFFICIAL POSITION	PHONE NUMBER

SIGNATURE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

**\*\*Please include a copy of your current Certificate:\*\***

Return this application to Superintendent's Office:

Marsh Valley School District #21

P.O. Box 180

Arimo, Idaho 83214