



**2018-2019
ON CALL SUPPORT SUBSTITUTE
(TEACHING ASSISTANT, SERVING LUNCH, FRONT DESK)
APPLICATION**

Please attach the following documents:

- Resume or Curriculum Vitae
- Applicable Transcripts (High School or Equivalent)

I am willing to substitute in : _____ Lower School (K-5) _____ Serving Lunch _____ Front Desk Assistant

I understand that I may be notified in advance of the need or the same day as the need arises.

The school may contact you as early as 6 a.m. Please circle your preferred contact method:

Text / Email / Phone Call

First Name	Middle Name	Last Name	Previously Used Names/Suffix
Birth Date	Social Security Number		
Contact Information:			
Email Address	Home Phone / Landline	Cell Phone	
Street	City	State	Zip Code
Emergency Contact Name	Relationship	Best Phone Number	

Professional References		
Name/Relationship	Email	Best Phone Number
Name/Relationship	Email	Best Phone Number

By signing this form I agree to follow the guidelines for substitute teachers at Thomas MacLaren School. I also consent to a background check by staff at Thomas MacLaren School. I acknowledge that my term of service is for one school year, and may be renewed for subsequent years with consent of the Head of School.

Signature _____
Date