Substitute Reactivation Application 2016 - 2017

DATE	FULL LEGAL NAME	SOCIAL SECURITY

MAILING ADDRESS	CITY, STATE, ZIP	PHONE

EMAIL ADDRESS

☐ Address and/or phone number have changed from the previous year.

☐ YES, I would like to continue my employment as a substitute teacher with the MSBSD for the 2016-2017 school year.

☐ NO, I do not wish to substitute with the MSBSD. Please accept my resignation as a substitute

Effective Signature

**********OFFICE USE ONLY – DO NOT COMPLETE ANY SECTION		
MUNIS ID NO.	**EFFECTIVE DATE FROM**	**EFFECTIVE DATE TO**

EXT. ID 3	EXT. ID 4		TITLE	BASE RATE
NON-DEGREE			NON CERT/ DEGREED – TCHR POSITIONS	$ 9.00
			SUB FOR EMPLOYEES IN PAY GR. 1-5	$ 9.75
			SUB FOR EMPLOYEES IN PAY GR. 6-9	$11.60
			SUB FOR EMPLOYEES IN PAY GR. 10-14	$13.66
DRIVER			DELIVERY DRIVER	$14.30
			WAREHOUSE INVENTORY SPECIALIST	$14.30
DEGREE			NON CERT W/ BA-BS DEGREE –TCHR POS.	$16.00
CERTIFIED			CERTIFIED SUB – ALL POSITIONS	$20.00
NURSE			CERTIFIED NURSE	$22.00
			SUMMER O & M SUPERVISOR	$16.53
	TEMP WKR 1YR		I.T. INTERN	$10.00
	POOL NURSE		POOL NURSE SUB	$24.00
			WELDING INSTRUCTOR	$25.00

COMMENTS	
HR Entered Date:	**Entered By:**

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PLEASE INDICATE THE SUPPORT STAFF POSITIONS YOU ARE WILLING TO SUBSTITUTE:

Clerical ☐ Food Service ☐ Special Ed Assistant ☐

Day Care Worker ☐ Custodian/Building Assistant ☐ Tutor/Advisor ☐

Delivery Driver* CDL Required ☐ School Monitor ☐

PLEASE INDICATE TEACHING POSITION(S) YOU ARE WILLING TO SUBSTITUTE:

PLEASE NOTE THAT ALL SUBSTITUTES MUST HAVE GRADUATED FROM HIGH SCHOOL A

(MINIMUM OF 3 YEARS IN ORDER TO SUBSTITUTE IN A TEACHING POSITION)

Classroom Teacher ☐ Preschool Teacher ☐

Librarian ☐ Special Ed Teacher ☐

Nurse ☐ ELL Teacher ☐

Names of any relatives by blood or marriage who are employed by the MSBSD Borough School District (MSBSD) or who serve on the MSBSD Board of Education

Name: Relationship

Dept/Building

Name: Relationship

Dept/Building

EMPLOYMENT HISTORY

Employment Dates: Job Title:

Employer: Address: Phone:

Employment Dates: Job Title:

Employer: Address: Phone:

PROVIDE 3 REFERENCES ABLE TO ATTEST TO YOUR SUITABILITY AS A SCHOOL EMPLOYEE (NOT RELATIVES);

Name: Phone:

Name: Phone:

Name: Phone:

CERTIFICATION OF APPLICATION

Have you ever been involuntarily released, non-retained, or asked to resign for any reason?
☐ YES ☐ NO
If YES, describe in full, and list the position:

Have you **ever been convicted of, or received a suspended imposition of sentence for, a misdemeanor**? ☐ YES ☐ NO
If yes, describe in full and list the date, city and state in which convicted.

Have you **ever been convicted of, or received a suspended imposition of sentence for, a felony**? ☐ YES ☐ NO
If yes, describe in full and list the date, city and state in which convicted.

BY SIGNING THIS APPLICATION I HEREBY CERTIFY that all information made on or in connection with this application is true and complete to the best of my knowledge and belief and that I have not knowingly withheld any fact or circumstance. I understand that any misrepresentation or concealment of material fact will be sufficient grounds for rejection of my application or my removal from employment. An inquiry may be made to include confirmation and information as to my character, general reputation, personal characteristics, previous employers, educational background, current and previous residence locations for the past five years, military service and conviction records. **I have never been involuntarily released from any position, non-retained, nor have I been asked to resign for any reason.** I have not committed any criminal act of child abuse or molestation or any sexual abuse of a minor; any act involving the illegal use or abuse of a controlled substance; any criminal act involving the use or abuse of alcohol; or any other crime of immorality (which means any act involving a crime of moral turpitude under the Laws of the State of Alaska). If I have been involved in any of the situations listed above, I have attached to this application description of the events and an explanation why I believe such situation should not adversely affect my application for employment. I authorize my present and previous employers and listed references to release to the MSBSD any information they may have regarding my character, background, or my employment record. I release these individuals and their agents from any damage or claim for furnishing said information. I am aware that Alaska Statute 12.62.160 provides that an employer may obtain from the Alaska Commission on Criminal Justice a record of all convictions, and that a favorable record check will be a condition of any offer of employment made by the MSBSD. I understand that employment with the MSBSD requires the approval of the Human Resources Director or designee. Employment offers are made only by the District's HR Department and must be ratified by the School Board.

Signature **Date**

THE MATANUSKA-SUSITNA BOROUGH SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER AND COMPLIES WITH TITLE IX OF THE EDUCATION AMENDMENT ACT OF 1972, with the Americans with Disabilities Act, and with all other state and federal employment laws. The District does not discriminate against any person on the basis of race, religion, color, national origin, age, disability, gender, and marital status, changes in marital status, pregnancy or parenthood. Should you need any assistance for any reason during any stage of the employment process, please discuss your needs with a member of the Human Resources Staff. Every effort will be made to reasonably accommodate you in this process.