

**GRAINGER COUNTY DEPARTMENT OF EDUCATION**

P. O. Box 38  
Rutledge, TN 37861

**APPLICATION FOR SUBSTITUTE  
PLEASE TYPE OR PRINT**

Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Maiden

Current Address \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip Code

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number \_\_\_\_-\_\_\_\_-\_\_\_\_

E-Mail Address \_\_\_\_\_ Telephone No. \_\_\_\_\_

What area(s) are you interested in substituting? (Check all that apply)

\_\_\_ Teacher \_\_\_ Educational Assistant \_\_\_ Cafeteria \_\_\_ Custodian

In what schools are you willing to work? (Check all that apply)

\_\_\_ Bean Station Elementary \_\_\_ Grainger Academy \_\_\_ Grainger High \_\_\_ Joppa Elementary  
\_\_\_ Rutledge Elementary \_\_\_ Rutledge Middle \_\_\_ Rutledge Primary \_\_\_ Washburn School

What days of the week are you available? \_\_\_ M \_\_\_ T \_\_\_ W \_\_\_ TH \_\_\_ F

Did you work as a substitute for Staff EZ/PESG in the past? \_\_\_ Yes \_\_\_ No

Per T.C.A., any employee in a non-certified position is employed as an at-will employee.

**EDUCATIONAL BACKGROUND**

*Proof of high school graduation or higher degree must accompany this application*

Name and Address of Schools	Dates: From/To	Degree/Diploma	Major

**WORK EXPERIENCE**

Name and Address of School	Name, Address & phone number of Immediate Supervisor	Dates Employed	Type of Work

READ CAREFULLY BEFORE SIGNING

- § I certify that all information in this application is complete and correct to the best of my knowledge.
- § I agree that if any information changes either before or after employment, I will notify the Central Office immediately.
- § I recognize that if I am employed as a substitute the Board of Education/school administrator may assign me to a specific position as the need requires.
- § I have not been convicted of a misdemeanor or a felony in any state of the United States.
- § I have not been dismissed from any previous employment for improper unprofessional conduct, inefficient service, neglect of duty, incompetence or insubordination.
- § I do not have any contagious or communicable disease which may endanger the health of school children or other personnel.
- § I understand that misrepresentation of any statements may subject me to a fine, loss of an opportunity for employment, and loss of position if employed.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature of Applicant Date

*The following is required by Tennessee State Law and the Grainger County Board of Education:*

\_\_\_\_\_ **I AM** related to a member of the school board, the director of schools, an administrator in the system, a county commissioner, or any appointed/elected county official.

\_\_\_\_\_ **I AM NOT** related to a member of the school board, the director of schools, an administrator in the system, a county commissioner, or any appointed/elected county official.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Tennessee State Law, T. C. A. 49-5-413 requires that every employee working in proximity to children must complete a Criminal History Records Check. The check involves fingerprinting and submission of the report to the Tennessee Bureau of Investigation. This procedure is done as a part of the employee's intake procedure. Employees will bear the cost of the background check. Deficient background checks will terminate employment.

*The Grainger County Board of Education does not discriminate on the basis of age, sex, race, color, religion, national origin, or disability in the operation of its educational programs and activities including employment practices.*