

Dr. Barry W. Tull, *Headmaster*



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**APPLICATION FOR SUBSTITUTE TEACHING POSITION**

Should you require any special accommodations to participate in the application process, please let us know at the time of application, or at the time an appointment is scheduled.

**WORCESTER PREPARATORY SCHOOL IS AN EQUAL OPPORTUNITY EMPLOYER**

**PERSONAL INFORMATION**

Legal Last Name: \_\_\_\_\_ Legal First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Local/Temporary Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
(If this is the same as Local/Temporary Address please leave blank.)

Contact Numbers: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_

May we contact you via email: YES ( ) NO ( ) Email Address: \_\_\_\_\_

**POSITION APPLYING**

Subject(s) and grade level(s) for which you wish to substitute: \_\_\_\_\_

Have you ever applied to Worcester Preparatory School for Employment: YES ( ) NO ( ) If so, what month/year: \_\_\_\_\_

**EDUCATION INFORMATION**

**HIGH SCHOOL:**

Diploma: YES ( ) NO ( )

G.E.D.: YES ( ) NO ( )

School(s): \_\_\_\_\_ City/State: \_\_\_\_\_

**COLLEGE AND/OR UNIVERSITY:**

School: \_\_\_\_\_ City/State: \_\_\_\_\_

Major: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

School Years Attended: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

(2)

School: \_\_\_\_\_ City/State: \_\_\_\_\_

Major: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

School Years Attended: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

(3)

School: \_\_\_\_\_ City/State: \_\_\_\_\_

Major: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

School Years Attended: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

**VOLUNTEER POSITIONS:**

(1)

Name of Organization: \_\_\_\_\_ How Many Years: \_\_\_\_\_

Contact: \_\_\_\_\_ Tel: \_\_\_\_\_

(2)

Name of Organization: \_\_\_\_\_ How Many Years: \_\_\_\_\_

Contact: \_\_\_\_\_ Tel: \_\_\_\_\_

## EMPLOYMENT HISTORY

**Please start with your most recent job. Accurately list all relevant jobs you have held. Be certain to include accurate telephone numbers for reference.**

(1)  
Employer: \_\_\_\_\_ Subject Taught: \_\_\_\_\_  
*(If applicable)*

Employer Address: \_\_\_\_\_ Tel: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

Description of Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer? YES ( ) NO ( ) Supervisor: \_\_\_\_\_

(2)  
Employer: \_\_\_\_\_ Subject Taught: \_\_\_\_\_  
*(If applicable)*

Employer Address: \_\_\_\_\_ Tel: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

Description of Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer? YES ( ) NO ( ) Supervisor: \_\_\_\_\_

(3)  
Employer: \_\_\_\_\_ Subject Taught: \_\_\_\_\_  
*(If applicable)*

Employer Address: \_\_\_\_\_ Tel: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

Description of Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

### UPON YOUR FIRST DAY OF SUBSTITUTING:

Can you submit verification of your legal Right To Work in the United States? YES ( ) NO ( )  
(In accordance with the immigration Reform and Control Act of 1986, any offer of employment is contingent upon satisfactory proof of applicant's identity and legal ability to work in the United States.)

Are you authorized to work for all United States employers or only your current employer?     All     Current

Have you ever been convicted of a felony? YES ( ) NO ( )  
If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

\*Please Note: A conviction will not necessarily automatically disqualify you from employment. Rather, such factors as age and date of conviction, seriousness and nature of crime, and rehabilitation will be considered.

## REFERENCES

Please provide names, addresses, and telephone numbers of at least three professional references who are not related to you:

(1)  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Tel: \_\_\_\_\_  
\_\_\_\_\_

(2)  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Tel: \_\_\_\_\_  
\_\_\_\_\_

(3)  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Tel: \_\_\_\_\_  
\_\_\_\_\_

### \*PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING BELOW\*

I hereby certify that all of the information provided by me in this application (or any other accompanying documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents may be cause for denial of employment or in termination of employment regardless of the timing or circumstances of discovery.

In consideration for employment with Worcester Preparatory School, if employed, I agree to conform to the rules, regulations, policies, procedures of the school at all times and understand that such acknowledgement is a condition of employment. I understand due to the nature of the school, attendance and punctuality are considered essential requirements of a school employee.

I understand that if offered a position with Worcester Preparatory School, I will be required to submit to a pre-employment background and fingerprint check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment checks will result in withdrawal of any employment offer or termination of employment if all ready employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to Worcester Preparatory School and/or any of its representatives and I release parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for one year. If I wish to be considered for any future position, after this period I must fill out and submit a new application.

**BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENT:**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**WORCESTER PREPARATORY SCHOOL IS AN EQUAL  
OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL RECEIVE  
CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN,  
AGE, DISABILITY, VETERAN STATUS, OR ANY OTHER STATUS PROTECTED BY LAW.**