

A Great Place to Learn



**Substitute Teacher
Application for Employment
www.mulberryschool.org**

**1101 Douglas Street
Normal, IL 61761**

**Phone: 309-862-0510
Fax: 309-862-0582**

Email: info@mulberryschool.org

Name _____

Local Address _____
City Zip

Cell Phone _____ Email address _____

Preferred method of contact (check one): _____ text _____ call _____ email

I have a(n): _____ Associate's Degree _____ Bachelor's Degree _____ Master's Degree

____ Early Childhood ____ Elementary Education ____ Other (please list)_____

Please attach a current resume.

Contact person in case of emergency _____
Name Phone

Hours of availability:

Monday	Tuesday	Wednesday	Thursday	Friday

Please answer the following questions:

1. Do you have reliable transportation: _____ Yes _____ No

2. Have you been convicted of a violation of the law? _____ Yes _____ No
(If yes, please explain on back page.)

3. Do you have, or have you been treated for a mental disorder or physical disability that could impact your ability to work with children? _____ Yes ____ No (If yes, please explain on back page.)

References: Please list 3 individuals over 21 years of age who are unrelated to you.

1. Name _____ Phone _____

Relationship to you _____

2. Name _____ Phone _____

Relationship to you _____

3. Name _____ Phone _____

Relationship to you _____

If accepted as an employee of Mulberry School, I will attend mandatory meetings, abide by school policies and accept that I will be considered an Illinois Mandated Reporter of Child Abuse and/or Neglect. By applying, I agree to a background check and to submit a physical including a negative TB test. I understand failure to meet the job description or to abide by policies/procedures of Mulberry School may result in termination of employment.

Signature _____ Date _____