



STILLWATER
CHRISTIAN SCHOOL

255 FFA Drive, Kalispell, MT 59901
(406) 752-4400 (406) 755-4061 Fax

SUBSTITUTE TEACHER APPLICATION

Name: _____ Date: _____
First M.I. Last

Home Address: _____
Street City State Zip

Please list any additional addresses where you have resided at any time during the past five years.

Home Phone: _____ Days available: _____

Preferred Grades: Elementary Middle School High School

List grades taught: _____

List subjects you have taught: _____

List additional subjects you are qualified to teach: _____

List special skills (musical instruments, hobbies, etc.): _____

SPIRITUAL DATA

Have you received Christ as your Lord and Savior? Yes No When? _____

Church affiliation: _____ (Please check one:) Member Regular attendee

On a separate sheet of paper briefly describe your faith in Christ including conversion and growth in your Christian walk.

ADDITIONAL INFORMATION

Have you ever been dismissed or resigned to avoid being dismissed, or asked to resign from a position? Yes No

If yes, explain.

Have you ever been convicted of any offense involving dishonesty, breach of trust, child abuse, moral turpitude, or any other type of crime? Yes No

If yes, indicate the nature of the offense, date, court, and disposition.

EDUCATIONAL BACKGROUND

HIGH SCHOOL EDUCATION:

School attended:	City, State

COLLEGE/UNIVERSITY EDUCATION:

School :	City, State	Degrees awarded

WORK EXPERIENCE

TEACHING: (Begin with most recent experience.)

School and address	Subjects and grades taught	Dates	No. of years

EXPERIENCE IN OTHER OCCUPATIONS:

Employer and address	Job description	Dates	No. of years

REFERENCE DATA

Please list names addresses and phone numbers:

1. _____
2. _____
3. _____
4. _____

I understand that Stillwater Christian School does not discriminate in its employment practices against any person because of race, color, national or ethnic origin, gender, age or qualified disability. I authorize the school to thoroughly interview my references. I authorize references to disclose all employment records and any other information related to my life and employment, without giving me prior notice of such disclosure. I release the school, my references and all other parties from all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. In signing below, I acknowledge that the above information is accurate.

Signature: _____

Date: _____