

Substitute Teaching Application

School Year _____

(All Questions Must be Answered)

New

Renew

Name: _____

Street Address: _____

City, Zip: _____

Preferred Contact Number: () _____

Email Address: _____

Certificate Type:

2-year license 5-year license 8-year Professional Certificate Permanent Certificate

Short-Term Substitute Long-Term Substitute 5-yr Short-Term Substitute 5-yr Long-Term Substitute

License Type: _____

Subject Area(s) as Shown on License/Certificate: _____

License/Certification Expiration Date: _____

Days Available : Monday Tuesday Wednesday Thursday Friday

Please indicate which districts you are interested in subbing for:

Fairport Exempted Village Schools

Kirtland Local Schools

Madison Local Schools

Painesville City Local Schools

Perry Local Schools

Riverside Local Schools

Auburn Career Center

Lake County Educational Service Center Units:

Preschool (please select locations): Fairport Kirtland Willoughby-Eastlake Perry

SBH/PHP (Severe Behavior/Partial Hospitalization) Program at Crossroads, Mentor

The Lake Academy (Alternative School), Willoughby

Lake County Vocational Transition Consortium (LCVTC) (please select locations): Perry Willoughby

Autism Unit at Crossroads, Mentor

L.E.A.D. (ED Unit), Painesville

For any of the above Lake County units you selected, would you be willing to sub as a classroom aide or job coach? Yes No

Please Initial the following statements:

_____ I am NOT currently under a full-time contract with any other Ohio School District.

I hereby affirm that all of the above information is accurate and subject to confirmation by the Lake County ESC.

Signature

Date

Return completed/signed application with a copy of your current certificate to: The Lake County Educational Service Center, Attention: Nan Karako 382 Blackbrook Road, Painesville, Ohio 44077 440-350-2563 ext. 726