

**APPLICATION FOR SUB TEACHING POSITION
GRAND VIEW R-2 SCHOOL
11470HWYC
HILLSBORO, MO 63050**

Date: _____

NAME: _____
Last First Middle

ADDRESS _____
Street City, State, Zip Phone
Permanent, if different

Street City, State, Zip Phone

Social Security #

RETIREMENT #

Name & Location of College or University Major Hours Minor Hours

Semester Hours: Undergraduate Graduate
Highest Degree Held

Major Field #Semester Hours

Minor Field #Semester Hours

TEACHING EXPERIENCE

Name & Location of School Subject (s) Taught Dates

Do you have a required MO Certificate? ☒ YES ☐ NO Date of expiration

Check department (s) in which you are prepared and willing to teach:

Primary Intermediate Junior High High School Grade Preference:

Music Art Physical Ed Coaching

REFERENCES: Give names & address of persons who have official knowledge of your work as a student or teacher. Please list two.

Please attach a letter stating your personal & professional qualifications for teaching. Include in the letter your reasons for wanting to teach at Grandview R-II.

A complete transcript and resume should be enclosed or forwarded.

Your signature below grants permission for Grandview R-II School officials to check your police record and employment history.

SIGNATURE OF APPLICANT

DATE

Grandview R-II does not discriminate on the basis of race, national origin, sex, creed or handicap.