## SUBSTITUTE COMPENSATION

DAILY PAY FULL DAY (OVER 4 HOURS)\* = \$130.00 ½ DAY (4 HOURS AND BELOW)\* = \$65.00

Certified teachers with a current teaching license, see school Director for potential pay differential.

\*Times are based on the start and end times indicated by Mariposa Staff.\*

#### **LONG TERM PAY**

Long term substitute for more than 20 consecutive days please see below pay scale. \*Start of long term pay differential at discretion of Director.\*

	½ Day	Full Day
21 days or more	\$75.00	\$150.00

### PAY PERIOD/AUTOMATIC DEPOSIT

Substitutes are semi-monthly. Pay periods are as follows:

- Pay Period 26<sup>th</sup> through the 10<sup>th</sup> of the month Pay Date is the 15<sup>th</sup>
- Pay Period 11<sup>th</sup> through the 25<sup>th</sup> of the month Pay Date is 30<sup>th</sup>

All pay will be deposited into a checking/savings account on the pay dates of each month.

## **ERRORS ON YOUR CHECK**

Call Mariposa Academy immediately if you have not received a check or if you feel there is an error on your check. Payroll gives us only two days to resolve any discrepancies and issue you a supplemental check. If you were overpaid, we will deduct the amount from your next check.

#### **FINGERPRINTS**

If you have done your fingerprints through WCSD and are a current sub, Mariposa Academy will allow you to work for us without having to re-do your fingerprints. If you ARE NOT fingerprinted through WCSD, Mariposa will pay for your fingerprinting upon hiring.



3875 Glen St. \* Reno, NV. 89502 P: 775.826.4040 \* F: 775.253.8743 www.mariposaacadmey.net

# **Employment Application**

<u>APPLICANT INFORMATION</u>		DATE:		
Last Name:	First:		M.I	
Street Address:	Apartment/Unit #:			
City:		State:	ZIP:	
Phone: (	E-mail Address:			
Position Applied for:				
Date Available:	Desired Salary:	Availabilit	y (PT, FT)	
Are you a citizen of the United States	s? Yes 🛭 No 🗖 If no, are you	authorized to wo	rk in the U.S.? Yes 🗖 No 🗖	
Will you now, or in the future, requir	e Mariposa Academy sponso	rship for employi	ment (e.g. H-1B visa)? Yes 🗖	No 🗖
Have you ever worked for this compa	any? Yes 🛭 No 🗖 If yes, Whe	en?		
Are you able to perform the essential accommodations? Yes $\square$ No $\square$	Il functions of the position fo	r which you are a	oplying, with or without reaso	onable
I currently have the following license	e/endorsement:			
■ NV TEACHING LICENSE#	·			
Endorsement	Grade	Ex	piration Date:	_
NV SUB LICENSE#	Grade	Ex	piration Date:	
Are you currently a Sub at WCSD 🗖 Y	'es □ No			
EDUCATION				
High School:	Address	s:		
From: To:	o: Did you graduate? Yes 🗖 No 📮 Degree:			
College:	Addres	s:		
From: To:	To: Did you graduate? Yes 🖵 No 🖵 Degree:			
College:	Addres	S:		
Other:	Address	s:		
From: To:	Did you gradua	Did you graduate? Yes 🗖 No 🗖 Degree:		

<b>REFERENCES</b> (Please list three professional references)	
Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	_ Relationship:
Company:	Phone:
Address:	
ADDITIONAL EXPERIENCE OR QUALIFICATIONS	
Skills, Experience, Hobbies:	
Prior Military Service:	
Is there anything that would interfere with your regular at	ttendance and punctuality?
I certify that all answers given by me are true, accurate an	·
for denial of employment or immediate termination of en	(or any other accompanying or required document) will be cause nployment, regardless of when or how discovered.
Signature:	Date: