

MEADE SCHOOL DISTRICT 46-1

SUBSTITUTE INFORMATION

Date: _____

Name: _____

Address: _____

E-mail: _____

Telephone: _____ Alternate Telephone: _____

Do you hold a valid South Dakota Teacher's Certificate? _____

If you are a student teacher in Meade School District, please list your college and proposed graduation date:

- Where are you willing to substitute?** (Check all that apply.) Any administrative unit K-12
- Sturgis Elementary (K-5) Piedmont Valley Elementary (K-6)
- Whitewood Elementary (K-6) Rural Schools (K-8)
- Sturgis Williams Middle School (6-8) Sturgis Brown High School (9-12)

Preferred Subject(s): _____

Are you willing to substitute in other areas? (Check all that apply.)

- Administrative Assistant Paraprofessional Cafeteria Worker

School Board Policy GCE states that "All persons employed as substitute teachers in Meade 46-1 schools shall participate in a conference with one of the district principals or their designees for the purpose of reviewing the Handbook for Substitute Teachers. Each substitute teacher and the principal or designee shall sign a form acknowledging when the orientation occurred." Therefore, the following forms must be on file in the Superintendent's office:

- ❖ This form signed by you and an administrator or his/her designee
- ❖ State and Federal background check results, per South Dakota state law
- ❖ A transcript or other academic verification of your college courses, S.D. teacher's certificate, high school diploma, or GED
- ❖ W-4 and I-9 tax forms

If we do not have this information on file, your paycheck may be withheld until such time as your paperwork is up-to- date.

I, _____, verify
(substitute teacher signature)

that I reviewed the substitute teacher handbook on _____ (date)

with _____
(signature of administrator or designee)

Please complete the reverse side of this form.

Have you previously been a substitute teacher in any school system? _____

If so, please tell us:

Date	Subjects	Grades	School Location

List 3 references (preferably people who can attest to your substitute teaching ability):

Name _____ Position _____
Address _____ School District, if applicable _____
Telephone _____

Name _____ Position _____
Address _____ School District, if applicable _____
Telephone _____

Name _____ Position _____
Address _____ School District, if applicable _____
Telephone _____

The Meade School District does not discriminate on the basis of gender, color, disability, national origin, race, creed, religion, homelessness, marital status, pregnancy or age in the education programs or activities it offers or to admission to or employment in its education programs or activities. Inquiries concerning Title VI or Title IX may be referred to Jeff Ward, 1230 Douglas Street, Sturgis, SD 57785, 605-347-4454. Inquiries concerning ADA may be referred to Brett Burditt, 1230 Douglas Street, Sturgis, SD 57785, 605-347-2523. Inquiries concerning Section 504 may be directed to Deb Wilburn-Kerstiens, 1230 Douglas Street, Sturgis, SD 57785, 605-347-4770. Inquiries concerning Title X, Part C may be directed to Chrissy Peterson, 1230 Douglas Street, Sturgis, SD 57785, 605-347-4770. Inquiries may also be directed to the Kansas City Office, Office of Civil Rights, US Department of Education, 8930 Ward Parkway, Suite 2037, Kansas City, MO 64114-3302, 816-268-0550, Fax: 816-823-1404, TDD: 877-521-2172, Email: OCR.KansasCity@ed.gov