



Plainville Public Schools

68 Messenger Street
Plainville, MA 02762

Ms. Jennifer Parson
Superintendent of Schools
Telephone: (508) 699-1300
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jparson@plainville.k12.ma.us

Substitute Application

Name: _____ Date: _____

Street: _____ Telephone No.: _____

City, State, Zip _____ Cell Telephone: _____

Date Available: _____ All M T W Th F

I prefer to work as a:

Teacher Paraprofessional Supervisory Para Nurse Food Services Custodian

Grades and subject in order of preference (for teaching/paraprofessional substitutes)

_____ K-6 _____ K-2 _____ 3-6 _____ Preschool

_____ PE _____ Music _____ Art _____ No preference

Have you ever been convicted of a felony? If yes, give details on back of page: Yes No

Education

High School: _____ Dates: _____

College: _____ Dates: _____

Degree: _____ Major: _____ Minor: _____

Graduate School: _____ Dates: _____

Degree: _____ Major: _____ Minor: _____

MA Certification: Yes : No Area: _____ Cert. No. _____

Are you certified in any other state? Yes No _____ (State)

Teaching or Other Work Experience or Attach a Resume:

Dates: _____
Dates: _____
Dates: _____
Dates: _____

Office Use Only: KS _____ RRP _____ AD _____ JP _____ CORI _____ FP _____

Special Interests or Activities Pertinent to Teaching:

Write briefly about your career aims, your educational beliefs, and other relevant information:

Please attach your resume and certification, if available, and return to:

Ms. Jennifer Parson, Superintendent
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AUTHORIZATION FOR RELEASE OF INFORMATION

I certify this application was completed by me and the entries contained in the application are true and complete to the best of my knowledge. I understand that misrepresentation or omission of facts requested on the application could be grounds for rejection of this application or dismissal from employment if subsequently discovered.

If hired, I agree to comply with all rules, regulations and policies of the Plainville Public Schools.

Print Name

Signature

Date