



Oak Hill Charter School

Substitute Teacher Application

Demographic Information

Date of Application: _____ SSN #: _____ Date of Birth: _____

Name: _____ Sex: _____ M _____ F

Address: _____ City: _____ State: _____ Zip: _____

Mailing Address (if different from above): _____

Cell Phone #: _____ Email Address: _____

Education Information

High School/ College	Degree Earned	Year Graduated

Do you have a teaching license? _____ Yes _____ No

If yes, please attach a copy of your license.

Work Experience With Children

Role/Job Title	Work Experience Description	Dates of Work

Qualifications

Please list all the qualifications you have that relate to the job of substitute teacher.

Background Information

At any point in time, have you ever been convicted of, or pled guilty or no contest to, a crime, a prayer of judgement continued, or a deferred prosecution for either a misdemeanor or a felony? _____ Yes _____ No

Do you have any criminal charges or procedures pending? _____ Yes _____ No

Have you ever been suspended, dismissed, fired or discharged from a position of employment or non-renewed for any reason other than a district or school-wide reason (e.g., reduction-in-force)? _____ Yes _____ No

Have you ever been the subject of an official investigation by an employer for allegation(s) involving or related to a minor? _____ Yes _____ No *If yes, please explain below and include if and how the matter was resolved.*

Signature: _____ Date: _____



226 Westinghouse Blvd., Ste. 302, Charlotte, NC 28273

(704) 504-0928 Fax: (704) 504-0931

www.employmentscreeninginc.com

PERSONAL INFORMATION RELEASE FORM

Company

Last Name First Name Middle Name

Maiden Name / Other Names / Aliases Sex/ Race

Date of Birth Social Security Number

Driver's License Number State Phone #:

Current Street Address

City State Zip Code

Please list any additional addresses residences in the last 7 years (most current first).

Street Address

City State Zip Code

Street Address

City State Zip Code

I, _____, hereby authorize Employment Screening, Inc., and all their associated agencies, partners, or other entities (hereafter referred to as ESI) to secure any and all personal information from any source of record that they deem necessary in order to perform a background check on me that could possibly include a drug test, credit check and/or employment/ education verification. I further authorize ESI to release said information to any person and/or company with which this form has been filed, including their agents, and release all of the aforementioned companies, agents, and entities from any and all legal liability for collecting, furnishing or otherwise reporting the personal background information of the applicant/employee/candidate above.

Applicant / Employee / Candidate Signature

Date