



Dale Marsden, Ed.D.  
Superintendent

Perry Wiseman, Ed.D.  
Assistant Superintendent

Dear Applicant:

We are pleased that you are interested in substitute teaching with the San Bernardino City Unified School District. Substitute teachers play a vital role in the daily operation of our schools. No matter if it is a day, a week or a month, substitute teachers make significant contributions to the education of our students.

Please complete and return the enclosed application form and required materials. Prior to being considered for an interview, it is important that you provide our office with the following:

- Completed substitute application form
- Copy of document indicating you have passed the CBEST
- Copies of all credentials (if applicable)
- Copy of university transcripts with posted bachelor's degree

If you are hired as a substitute teacher, you will need to provide our office with official transcripts, original social security card, original CBEST documentation and tuberculosis clearance. In addition, San Bernardino City Unified School District requires that all employees pass a drug screening and fingerprinting clearance prior to employment. Fees associated with substitute teaching (30 Day Emergency Substitute Permit, Certificate of Clearance, fingerprint clearance, etc.) can range from **\$32.00 to \$150.00**.

Thank you for considering the San Bernardino City Unified School District. If I can be of any assistance to you, please do not hesitate to call our office at (909) 381-1115.

Sincerely,

PERRY WISEMAN  
Assistant Superintendent  
Certificated Human Resources

Revised 1/2014

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**HUMAN RESOURCES DIVISION**

777 North F Street, San Bernardino, CA 92410 • (909) 381-1228 • Fax (909) 884-9830

**San Bernardino City Unified School District**

Human Resources-Certificated

777 North F Street, San Bernardino, CA 92410

Telephone: (909) 381-1115 or (909)381-1111

Date \_\_\_\_\_

Soc. Sec. No.: \_\_\_\_\_

**CERTIFICATED APPLICATION FORM**

An Equal Opportunity/ADA/504/Title VI/Title VII/Title IX/ADEA Employer

Position for which you are applying: **SUBSTITUTE TEACHER**

Name \_\_\_\_\_  
Last First Middle

Present Address: \_\_\_\_\_  
Number & Street

\_\_\_\_\_ City State Zip Code Home Telephone

\_\_\_\_\_ Cell Telephone

Email Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
Number & Street

\_\_\_\_\_ City State Zip Code Telephone

If there is someone who will know of your whereabouts at all times, please indicate:

\_\_\_\_\_ Name Address Telephone

**CERTIFICATION** Valid California credential(s) and/or permit(s) held: (List specific title and expiration dates)

Type: \_\_\_\_\_ Expires: \_\_\_\_\_

Type: \_\_\_\_\_ Expires: \_\_\_\_\_

If you are in the process of applying for a California credential and/or permit, list type and date of application:

Type: \_\_\_\_\_ Date: \_\_\_\_\_

Through which college or district? \_\_\_\_\_

List any foreign language you speak fluently: \_\_\_\_\_

Have you passed CBEST examination? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you NCLB compliant? Yes \_\_\_\_\_ No \_\_\_\_\_ By what means? \_\_\_\_\_

Have you passed a subject matter examination (CSET, MSAT, Praxis, or NTE)? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, in what subject? \_\_\_\_\_ Please include documentation.

**TEACHING EXPERIENCE** Record all teaching experience in chronological order, last position first. (Please include substitute teaching)

City or Town	State	Zip	Name of School	Grade/Subject Taught	Date	
					From (Mo., Yr.)	To (Mo., Yr.)

**STUDENT TEACHING EXPERIENCE**

City or Town	State	Zip	Name of School	Master Teacher	Grade/Subject Taught	Dates	
						From (Mo., Yr.)	To (Mo., Yr.)

**OTHER WORK EXPERIENCE** (Including nonteaching work experience)

Name of Employer	Address	Type of Employment	Dates of Employment	
			From	To

**PROFESSIONAL TRAINING**

EDUCATION: College and/or University Training

	College/University & Location	Dates	Degree/Credential	Major	Minor
Undergraduate					
Graduate					

**PERSONAL REFERENCES**

It is necessary for us to have names, addresses, and phone numbers of at least three references who are acquainted with you and your work experience and/or education. **INCLUDE YOUR LAST EMPLOYER.**

Name	Official Position	Email or Mailing Address	Phone Number

**OTHER MISCELLANEOUS INFORMATION**

Have you ever been convicted of an offense other than a minor traffic violation?

\*Yes \_\_\_\_\_ No \_\_\_\_\_

\*If yes, please state the nature of the offense(s), date(s), city and state, and disposition on a separate sheet of paper. A conviction record is not an automatic bar to employment and the nature, recency, and disposition of an offense will be considered only as it relates to the job for which you are applying.

Have you ever been discharged or forced to resign from any position because of misconduct or unsatisfactory service?

\*Yes \_\_\_\_\_ No \_\_\_\_\_

\*If yes, attach a separate sheet stating circumstances, including dates, names, address of employers, and causes.

Can you perform all job-related functions of this position?

Yes \_\_\_\_\_ No \_\_\_\_\_ Comment \_\_\_\_\_

**AGENCY FEE**

The District has an agency-fee agreement with the Communication Workers of America (CWA). Every employee in the collective bargaining unit represented by the CWA must pay an agency fee to the Union within thirty days of commencement of assigned duties and each pay period thereafter for which compensation is received. For more explicit information regarding the agency fee, contact:

**Communications Workers of America Local 9588**  
**190 West G Street**  
**Colton, CA 92324**

**Telephone (909) 422-8960**

I hereby certify that all statements made hereon are true and correct to the best of my knowledge and authorize investigations of all statements herein recorded. I release from all liability persons and organizations reporting information required by this application.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of Applicant

*The San Bernardino City Unified School District does not discriminate on the basis of race, color, national origin, ancestry, ethnic group identification, religious creed, marital status, sex (including sexual harassment), sexual orientation, gender (identity or expression), disability (physical or mental) or age in any of its policies, procedures, or practices in compliance with the Title VI and Title VII of the Civil Rights Act of 1964 (pertaining to race, color, religion, sex and national origin); Title IX of the Education Amendments of 1972 (pertaining to gender); Section 504 of the Rehabilitation Act of 1973 (pertaining to disability); and Age Discrimination in the Employment Act of 1975 (pertaining to age 40 and over), the Americans with Disabilities Act of 1990, the federal Family and Medical Leave Act, the California Family Rights Act and the Fair Employment and Housing Act. This nondiscrimination policy covers admission, participation, and accessibility to any program or activity of the district and selection, advancement, discharge and other terms, conditions and privileges of employment. Inquiries regarding the equal opportunity policies, equal program accessibility policies and the filing of complaint procedures alleging discrimination, including sexual harassment, may be directed to the school principal/site administrator or to the District's Affirmative Action Director, 777 North F Street, San Bernardino, CA, (909) 381-1122.*

## AUTHORIZATION TO RELEASE INFORMATION

As an applicant for the position of \_\_\_\_\_ with the San Bernardino City Unified School District, I am required to furnish information for use in determining my qualifications. In this regard, I authorize release of any and all information that you may have concerning me, including, but not limited to, information of a confidential or privileged nature, or any data or materials which have been sealed or agreed to be withheld pursuant to any prior agreement or court proceeding involving disciplinary matters.

I understand that I will not receive and am not entitled to know the contents of confidential reports received, and I further understand that these reports are privileged.

I hereby release, discharge, exonerate the San Bernardino City Unified School District, their agents and representatives, and any person furnishing information from any and all liability of every nature and kind arising out of the furnishing information from any and all liability of every nature and kind arising out of the furnishing and inspection of such documents, records, and other information, and this release shall be binding on my legal representatives, heirs, and assigns.

A photocopy of this release is to be considered as valid as an original.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**SAN BERNARDINIO CITY UNIFIED SCHOOL DISTRICT**  
SmartFindExpress

Substitute Teacher Form

NAME \_\_\_\_\_ TELEPHONE (\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_ EMAIL \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP \_\_\_\_\_ SSN: \_\_\_\_\_

**Identify the days of the week you are available to work. Mark your choices with an "X".**

IF YOU ARE AVAILABLE ALL DAYS, CHECK HERE \_\_\_\_\_

(A.M.) MON\_\_\_\_ TUES\_\_\_\_ WED\_\_\_\_ THURS\_\_\_\_ FRI\_\_\_\_

(P.M.) MON\_\_\_\_ TUES\_\_\_\_ WED\_\_\_\_ THURS\_\_\_\_ FRI\_\_\_\_

**Please choose the types of locations. Mark your choices with an "X".**

TYPE OF LOCATION

\_\_\_\_\_ 101000 Elementary Schools      \_\_\_\_\_ 104000 Special Education Classes

\_\_\_\_\_ 102000 Middle Schools      \_\_\_\_\_ 105000 Preschools

\_\_\_\_\_ 103000 High Schools      \_\_\_\_\_ 106000 Bilingual Elementary  
**(Must be fluent in Spanish)**