

Rivendell Guest Teacher Application

Name	
Contact Information	Home Phone: Cell: Email:
Areas	<input type="checkbox"/> Preschool (ages 3-4) <input type="checkbox"/> Younger Kids (Pre-K through 1 st) <input type="checkbox"/> Middle Kids (2 nd -3 rd) <input type="checkbox"/> Older Kids (4 th -5 th) <input type="checkbox"/> Art <input type="checkbox"/> PE <input type="checkbox"/> Spanish <input type="checkbox"/> Music <input type="checkbox"/> German <input type="checkbox"/> Computers
Availability	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday *Indicate if you are only available for part of the day on the days marked above.
Qualifications	Based on the above selections, please describe your interest or qualifications to substitute for these area/s. Address all checked categories.

Licenses	<p>Do you have a substitute license through a local school district? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which school district/s?</p> <p>Do you have a Colorado Teaching License? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: License Number _____ Expiration Date _____</p> <p>Do you have a teaching license in another state besides Colorado? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: License Number _____ Expiration Date _____ State _____</p>
Background Check	<p>Do you have results from a background check within the last year? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, are you willing to pay \$43 to have a background check through Rivendell? This background check will be good for one year. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>(Office use only). In order to be added to the Rivendell Substitute List,</p>	<p><input type="checkbox"/> Guest Teacher Application</p> <p><input type="checkbox"/> Signed Rivendell Guest Teacher Expectations</p> <p><input type="checkbox"/> Background Check Documentation</p>

you must submit all of the required documentation	____Resume
	____W-4
	____I-9

Please list a minimum of 2 references who know you professionally. Describe your relationship to the references.

Reference 1:

Name:

Position:

Email:

Phone:

Nature of Relationship:

Reference 2:

Name:

Position:

Email:

Phone:

Nature of Relationship: