



## Substitute Teaching Application

Please complete the following application and mail it to:

Voyager Academy  
4238 Technology Drive  
Durham, NC 27704

### Personal Information

*Please print clearly*

Name \_\_\_\_\_  
Last Name First Name Middle/Maiden

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

The Board of Directors may use your Social Security number on applications for teacher licensure; to obtain a criminal record check; to verify employment eligibility; and for internal payroll and personal records.

Present Address \_\_\_\_\_  
Street City State Zip

Present Telephone Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mobile Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

### **Related Work Experience:**

Position \_\_\_\_\_ Employer/Company \_\_\_\_\_

Begin Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ End Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Description of work:

### **Please circle your availability to substitute.**

Day  
Mon. Tues. Wed. Thurs. Fri. Any Day

Grade  
4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup>

Conditions of Employment

All North Carolina Charter Schools are equal opportunity employers and do not discriminate on the basis of race, color, religion, gender, age, disability, or national origin.

**Consumer Notification – Consumer Reports**

You are hereby notified that a consumer report or an investigative consumer report may be obtained from a consumer-reporting agency, other agency, or directly by this employer for the purpose of evaluating you for employment, promotion, reassignment, or retention as an employee. The report may contain information bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living from public or private record sources, or through personal interviews with your neighbors, friends, associates, or educational facility. You have the right to make a request of the Consumer Reporting Agency to receive the information in its files on you at the time of your request. They will require proper identification and the payment of any authorized fees.

**PLEASE PLACE A CHECK ON THE APPROPRIATE LINE: If you answer “Yes” to any of the questions below, please provide a detailed explanation on a separate sheet of paper.**

- | Yes | No  |  |
|-----|-----|--|
| ___ | ___ | <i>Have you ever been suspended or dismissed from a job?</i>   |
| ___ | ___ | <i>Have you ever been asked to resign from your job in the face of possible adverse employment action?</i>   |
| ___ | ___ | <i>Have you ever received a below standard or unsatisfactory rating on a job performance evaluation?</i>   |
| ___ | ___ | <i>Have you ever been placed on an action plan (mandatory improvement plan) or been told that you would be required to complete an action plan?</i>  |
| ___ | ___ | <i>Have you ever been found guilty of any violation of law other than a minor traffic ticket? (If you have been convicted of writing worthless checks, driving while impaired, or driving while license revoked, you must answer “yes” to this question.)</i>                |
| ___ | ___ | <i>Have you ever pleaded guilty, pleaded no contest, received a Dismissal with Leave, a Prayer for Judgment, a Prayer for Judgment (continued), or entered into a Deferred Prosecution agreement for any charged violation of the law other than a minor traffic ticket?</i> |
| ___ | ___ | <i>Do you have criminal charges or procedures pending against you?</i>   |
| ___ | ___ | <i>Are you currently under an obligation to perform or have you ever performed community service?</i>  |
| ___ | ___ | <i>Are you currently on, or have ever been sentenced to, supervised or unsupervised probation?</i>   |

*I, the undersigned applicant/employee hereby expressly authorize Voyager Academy’s Board of Directors, its agents, and its employees to make any investigation of my personal or employment history, expressly including, but not limited to, federal and/or state criminal law enforcement, or traffic records, which may include confirmation by fingerprint identification. I further authorize any former employer, person, firm, corporation, credit agency, administrative body, or governmental agency to give to the Board of Directors, its agents, or its employees any information they may have regarding me. In consideration of the review of my employment application by the Board of Directors, its members, officers, agents, or its employees, I hereby release the Board of Directors to which this application is submitted and any and all providers of information to whom this release is sent, from any liability as a result of furnishing or receiving this information. If employed, I further authorize this Board of Directors or its agents to provide information about my employment in this school system to future employers or prospective employers. I authorize persons to whom an exact copy of this release is presented to rely on the copy as if it were a signed original. I have read the information contained in the application carefully and certify that the information I have given is correct and complete. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal.*

Signature \_\_\_\_\_

Date \_\_\_\_\_