CUMBERLAND SCHOOL DISTRICT

Sub	stitute Teac	her Application	
Substitute Tea	cher's Guide (Substitute retains th	his guide)	
application and p	roof of licensure, you will recei	nic onboarding system. Upon the return of your ive a welcome email with the nessecary forms to the Cumberland School District subsitute call list.	
Name Last Address (Street, City, S	First State, Zip Code)	Middlel	-
Telephone Numbers () ()		Email Address:	-
Date of Birth Social Security #			
Date of Application I verify, to the best		ormation provided is truthful. I understand that false grounds for dismissal.	e
Signature of Applicant:	:	Apr-23	-

If you have any questions, please contact the payroll department at: 715/822-5124 x 2, ndona@csdmail.com

APPLICATION

License:	 	 	
Prefer:	 	 	

EDUCATIONAL PREPARATION

Attended	Name of School or Training Institution	Degree	GPA
College			
Major		Minor	
Graduate V	/ork: List College and Degree or number of cre	dits beyond BA	

TEACHING AND CERTIFICATION

Subjects or Grade	Number of Years	WI Certification	Grade/Age Levels	Year License
Levels Taught	Teaching Exp.	Code	Certified	Expires

PROFESSIONAL EXPERIENCE / STUDENT TEACHING EXPERIENCE

Dates (From-To)	Place (School and City)	Grade or Subjects	Supervisor	Pay Rate

REFERENCES

(Include your present immediate supervisor)

Place and Address	Position	Phone Numb
-		