

PARKLAND SCHOOL DISTRICT - Substitute Information Survey 2011-2012**FOR OFFICE USE ONLY****INSTRUCTIONS:** ALL SUBSTITUTES MUST COMPLETE Sections 1,2,& 3. Substitute Teachers MUST ALSO complete Section 4. Substitutes for other areas MUST ALSO complete Section 5.**DSTC:** _____

Section 1 Name _____ Address _____ Telephone # (one only) (_____) Email Address _____	Section 2 I am available to substitute in the following buildings: (✓ all that apply) <input type="checkbox"/> Cetronia Elementary <input type="checkbox"/> Kratzer Elementary <input type="checkbox"/> Fogelsville Elementary <input type="checkbox"/> Parkway Manor Elementary <input type="checkbox"/> Ironton Elementary <input type="checkbox"/> Schnecksville Elementary <input type="checkbox"/> Jandl Elementary <input type="checkbox"/> Orefield Middle School <input type="checkbox"/> Kernsville Elementary <input type="checkbox"/> Springhouse Middle School <input type="checkbox"/> Parkland High School
Section 3 I AM AVAILABLE ON (✓ all that apply): <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	

Section 4 *ONLY Substitute Teachers MUST Complete I am certified to teach at the: <input type="checkbox"/> Elementary Level (K-8) <input type="checkbox"/> Secondary Level <input type="checkbox"/> Guest Teacher <input type="checkbox"/> School Nurse (Certified) My certification is in: _____ I am willing to sub outside of my certification in the following areas: _____	Section 5 I would like to be on the sublist for: (✓ all that apply) <input type="checkbox"/> Secretary <input type="checkbox"/> Teacher's aide <input type="checkbox"/> Nurse (must be R.N.) <input type="checkbox"/> Health room aide <input type="checkbox"/> Paraprofessional <input type="checkbox"/> Playground aide <input type="checkbox"/> Hall monitor
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Additional Comments: _____