

# NON-CERTIFICATED SUBSTITUTE EMPLOYMENT APPLICATION

MONROE TOWNSHIP SCHOOL DISTRICT  
423 Buckelew Avenue  
Monroe Township, New Jersey 08831

732-521-2111

Fax: 732-521-2719

**Position Desired:**

- Secretary
- Paraprofessional
- Technology
- Security

**NAME:** \_\_\_\_\_  
Last First Middle

**ADDRESS:** \_\_\_\_\_  
Number/Street City/State Zip Code

**TELEPHONE:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_ **SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**ARE YOU CITIZEN OF THE UNITED STATES?** \_\_\_\_\_ YES \_\_\_\_\_ NO

**HAVE YOU EVER BEEN CONVICTED OF A CRIME?** \_\_\_\_\_ YES \_\_\_\_\_ NO

**IF YES, PLEASE EXPLAIN:** \_\_\_\_\_

**HAVE YOU COMPLETED THE FINGERPRINTING PROCESS IN ANOTHER DISTRICT?** \_\_\_ YES \_\_\_ NO

**IF YES, HAVE YOU BEEN CONTINUOUSLY EMPLOYED BY THAT DISTRICT?** \_\_\_ YES \_\_\_ NO

## EDUCATIONAL BACKGROUND

Type	Name of School City & State	Course of Study	Dates of Attendance	Credits/ Degree	Date of Graduation
High School					
College					
Other					

**WORK EXPERIENCE**

Company Name	Mailing Address	Position Held	Supervisor	Dates Employed

**REFERENCES**

Please list names of people who have firsthand knowledge of your work performance

Name	Number/Street	City/State	Zip Code	Phone Number
1.				
2.				
3.				
4.				

Four references will be contacted to complete the application process

**MILITARY SERVICE**

Branch of Service	Highest Rank Rating	Present Status	Dates of Service

**SPECIAL LICENSES OF CERTIFICATES HELD:**

Title: \_\_\_\_\_ Date Issued: \_\_\_\_\_

**LIST ANY CIVIC ACTIVITIES, EXPERIENCE, SKILLS, OR QUALIFICATIONS YOU FEEL WOULD ESPECIALLY FIT YOU FOR WORK IN OUR DISTRICT:** \_\_\_\_\_

**LOCATION PREFERRED:**

- |   |   |
|---|---|
| <input type="checkbox"/> Barclay Brook School | <input type="checkbox"/> Applegarth School  |
| <input type="checkbox"/> Brookside School     | <input type="checkbox"/> Oak Tree School    |
| <input type="checkbox"/> Mill Lake School     | <input type="checkbox"/> Monroe Township MS |
| <input type="checkbox"/> Woodland School      | <input type="checkbox"/> Monroe Township HS |
| <input type="checkbox"/> Central Office       |   |

**WHEN ARE YOU AVAILABLE TO START?** \_\_\_\_\_

**DAYS AVAILABLE:**

Monday     Tuesday     Wednesday     Thursday     Friday

**SIGNATURE**

**DATE**