

Tidewater Academy
217 W. Church St.
Wakefield, VA 23888
www.tawarriors.org

APPLICATION FOR SUBSTITUTE TEACHER

Name:	Date of Birth:	
Address:	Phone:	
City	State:	Zip:

EMPLOYMENT HISTORY (Start with most recent employer)

Dates	Employer Name and Address	Reason Leaving

REFERENCES

Name	Address	Relationship	Phone

Three (3) written references should be included when completing this application.
Written references may be mailed separately to the Head of School.

PLEASE ANSWER THE FOLLOWING QUESTIONS WITH EITHER "YES" OR "NO"

1. Have you ever been charged and convicted of any crime?
2. Have you ever had any substance abuse problems?

All new Tidewater Academy employees are required to undergo a criminal records check.
Please list the areas or grade levels where you would like to substitute: _____