

RENEWAL UWDUVK/WWE EMPLOYMENT CPPLICATION

TO BE PLACED BACK ON THE SUBSTITUTE LIST FOR THE NEW SCHOOL YEAR, THIS FORM MUST BE RETURNED TO HUMAN RESOURCES 'ALL AREAS MUST BE COMPLETED UNLESS OTHERWISE INDICATED

Please Choose Sc	hool District(s):						
CWES	CWUES	WMS	HCS	JFES		JSRHS	SAU
Please Choose Po	sition(s) in Which	to Substitute:					
Teacher	Para-Educator	Custodian	Food Service Assistant		Nurse	Administrative Assistant	
Please Choose Da	ays(s) Available:						
Monday	Tuesday	Wednesday	Thursday	Friday			
Please Indicate if	Available for Scho	ool Vacation(s)	(For Custodians Only	y):			
Winter	Spring	Summer					
Currently a Colle	ege Student?						
Yes	No						
Name: Last	ast		First			Middle	
Present Address:							
	Street		City			State	Zip
Permanent Addre	-						
(If Different)	Street		City			State	Zip
Telephone #:			Cell Phone #:				
E-Mail Address:							