

Hollister School District  
Human Resource Department  
2690 Cienega Road  
Hollister, CA 95023

• (831) 630-6300 ~ Fax (831) 634-2080 ~ [www.hesd.org](http://www.hesd.org) •

<b>Classified Substitute Application Checklist</b>
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Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Classified Substitute Application will be accepted and considered complete, "**ONLY**" if each of the following items are submitted. Resume will not be accepted in lieu of an application.

1. Hollister School District Application (Complete both side)
2. Copy of High School Diploma, GED or Official Transcripts
3. Sign Application

**High School Diploma isn't needed for Yard Duty Supervisor position.**

# Hollister School District

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## Classified Substitute Application Only

PERSONAL INFORMATION			
Last Name	First Name	Middle	
Address	City	State	Zip
Home Phone	Cell Phone	Social Security Number	
CLASSIFIED SUBSTITUTE POSTIONS ONLY			
Positions Titles (Please circle all positions you are interested in being called to work as a substitute). <b>Clerical, Food Service Worker, Custodian, Inst Assistants, Yard Duty Supervisors</b>		School	
Are you willing to work part-time?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you willing to work as a day-to-day substitute?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you interested in working with children who have physical or mental disabilities?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If hired, date when available to work _____			
EDUCATION			
	School Name & Complete Mailing Address	Highest Grade Completed	Major Course of Study
High School			
College			
Other			
EXPERIENCE (Start with the most recent)			
Dates: From _____ To _____ Title _____			
Duties _____			
Reason for leaving _____ Salary _____			
Employer Name _____			
Employer Address _____			
Supervisor's Name _____ Telephone (____) _____			
Dates: From _____ To _____ Title _____			
Duties _____			
Reason for leaving _____ Salary _____			
Employer Name _____			
Employer Address _____			
Supervisor's Name _____ Telephone (____) _____			
Dates: From _____ To _____ Title _____			
Duties _____			
Reason for leaving _____ Salary _____			
Employer Name _____			
Employer Address _____			
Supervisor's Name _____ Telephone (____) _____			

**LANGUAGE ABILITY**

Fluent in _____ _____	Able to Speak _____ _____	Able to Read & Write _____ _____
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**SKILLS (Check skills you possess pertaining to the position applied for.)**

<input type="checkbox"/> Copier Machine <input type="checkbox"/> Filing <input type="checkbox"/> Shorthand _____ WPM <input type="checkbox"/> Ten-Key	<input type="checkbox"/> Typing _____ WPM <input type="checkbox"/> Personal Computer Word Processing Programs _____ Spreadsheet Programs _____ Other Programs _____
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List other machines/skills you have knowledge of \_\_\_\_\_  
\_\_\_\_\_

Special interests or hobbies \_\_\_\_\_  
\_\_\_\_\_

List any volunteer experience working with children \_\_\_\_\_  
\_\_\_\_\_

**PROFESSIONAL REFERENCES (In order for your application to be given full consideration, correct names, addresses, and phone numbers must be provided for all references.)**

Name	Position	Business Name & Complete Mailing Address	Phone

**OTHER INFORMATION**

How did you find out about this job? Please check the appropriate box below.

<input type="checkbox"/> Walk-in/Phone Call	<input type="checkbox"/> Relative	<input type="checkbox"/> Employee
<input type="checkbox"/> Bulletin Board	<input type="checkbox"/> Job Posting	<input type="checkbox"/> Internet
<input type="checkbox"/> Newspaper, please indicate which newspaper _____		

Are you 18 years of age or older?  Yes  No

Can you provide proof of U.S. citizenship or ability to legally work in the U.S.?  Yes  No

Have you ever been employed by the Hollister School District?  Yes  No

If yes, in what classification and when \_\_\_\_\_

Have you ever taken the District Basic Proficiency Test?  Yes  No

If yes, when? \_\_\_\_\_

Have you ever taken the District Spanish Proficiency Test?  Yes  No

If yes, when? \_\_\_\_\_

Have you ever used another name?  Yes  No

If yes, please explain \_\_\_\_\_

Have you had any convictions other than minor traffic violations (including misdemeanors)?  Yes  No

(Failure to reveal convictions is grounds for immediate termination)

If yes, give details \_\_\_\_\_

Are you currently employed?  Yes  No

If yes, may we contact your present employer?  Yes  No

I certify that all statements on this application are true and complete to the best of my knowledge and authorize investigation of all statements recorded herein. I understand that any false or misleading statement of material facts may subject me to disqualification or dismissal. I give Hollister School District permission to contact anyone related to my previous employment. I release from all liability all persons and organizations reporting information required by this application. **THIS APPLICATION AND ALL DOCUMENTS SUBMITTED BECOME PROPERTY OF HOLLISTER SCHOOL DISTRICT AND CANNOT BE RETURNED.**

Signature \_\_\_\_\_

Date \_\_\_\_\_