



# Palos Verdes Peninsula Summer Schools Application

PO Box 2632 Palos Verdes Peninsula, CA 90274 Phone: 310-378-8695

## 2017 SUBSTITUTE APPLICATION

Choose 1  Summer High School  Summer PEP  Summer Break

PRINT Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip Code

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-Mail \_\_\_\_\_ Current Assignment \_\_\_\_\_

I am credentialed to teach the following classes \_\_\_\_\_

Previous PVP Summer Schools Assignments \_\_\_\_\_

Professional Reference(s) (Include name, relationship, phone)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_

Desired Position 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

New employee only:  Résumé attached  Credential copy attached Degree(s): \_\_\_\_\_

I would like to substitute – SUBSTITUTE PAY IS \$35.00/HOUR FOR THE 2017 SUMMER SESSION

SUMMER HIGH SCHOOL  PALOS VERDES HIGH SCHOOL ONLY

SUMMER PEP  MIRALESTE  PALOS VERDES INTERMEDIATE  RIDGECREST

SUMMER BREAK  CORNERSTONE  DAPPLEGRAY

I attest that the preceding information supplied to Palos Verdes Peninsula Summer Schools in the course of my application for employment is true and I have not misstated, misrepresented nor falsified any such information. I hereby authorize representatives of Palos Verdes Peninsula Summer Schools to contact references on the information I have provided and to conduct checks (criminal, credit, personal, business, education, among others) in the course of determining my suitability for employment. I understand that any false information provided on this information form is grounds for non-consideration of candidacy or termination of employment.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please email to: staff@pvps.com

