

# 2012 SUMMER SCHOOL TEACHING APPLICATION

**\*Summer School 2012 Dates: June 20 through July 18, 2012 (No School on July 4<sup>th</sup>)**  
For teachers and substitute teachers not employed by the Watertown Unified School District

_____ Name (Please Print)	_____ Date
_____ Street Address	_____ Social Security Number
_____ City, State and Zip	_____ Phone Number
_____ Email	_____ Cell Phone Number

Did you work for Summer School 2011?  Yes  No How many years have you taught Summer School? \_\_\_\_  
What class(es) did you teach in Summer School 2011? \_\_\_\_\_  
Do you want to work:  Morning (until 11:30)  Afternoon  Full Day (until 2:30)

Please check position(s) you are interested in:  Teaching  
 Substitute teaching ONLY

Number of full years of teaching experience \_\_\_\_\_ Where: \_\_\_\_\_

Have you had CPR training within the last year?  Yes  No Date \_\_\_\_\_

Have you had First Aid training within the last 3 years?  Yes  No Date \_\_\_\_\_

I am certified by the Wisconsin Department of Public Instruction as follows: (Please list all areas of certification)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I am interested in teaching the following Summer School courses:

Course Title

Choice #1 \_\_\_\_\_

Choice #2 \_\_\_\_\_

Courses you have taught in previous summer schools:

<u>Course Title</u>	<u>Year</u>	<u>Location</u>
_____	_____	_____
_____	_____	_____

I am currently employed at: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**RETURN THIS APPLICATION TO: Human Resources Office, 111 Dodge Street, Watertown, WI 53094**