



THE GARDEN SCHOOL OF MARIETTA

Substitute Sheet

Name: _____ Email: _____

Address: _____

Phone: _____ Alt Phone: _____

Please list any training/experience related to Waldorf education or environmental education.

Dates: _____ Training/experience: _____

Dates: _____ Training/experience: _____

Dates: _____ Training/experience: _____

Dates: _____ Training/experience: _____

Please relate any skills/interests that enhance your teaching ability: _____

Which of the following do you possess?

____ First Aid Certification ____ Lifeguard Certification ____ Aquatic First Response Cert

Please indicate your availability:

	Monday	Tuesday	Wednesday	Thursday	Friday
9:00					
10:00					
11:00					
12:00					
1:00					
2:00					
3:00					
4:00					
5:00					

Any other notes on availability? _____

Anything else we should know? _____

SCHOOL USE ONLY

____ Application received
____ Discipline policy review

____ Background check processed
____ Abuse prevention/identification/response training

____ Handbook review

Notes: