

Substitute Teacher Application Form

(For situations when an approved high school College Now teacher will be gone from class for longer than two weeks. Substitute instructors must complete the following application for review and consideration as to whether the course will still receive college credit)

Substitute Teacher Information			
Name			
Phone_			
Email Address			
Date of Birth (required):			
School Information			
School			
School Address			
City, State, Zip			
School Phone School Phone			
Name of the approved high school instructor nee	ding a substitute		
College Now courses taught during the duration	of the leave		
Course Dates: Course start date:	Course end date:		
Dates of anticipated substitute duration. Start dat	e:	End date:	
SMSU Faculty mentor name:			
Principal Signature	Date		-
Principal Email			_

Include all of the following to complete the application:

- 1. Substitute Teacher Application Form (this form)
- 2. A letter from the regular approved high school teacher explaining the situation and need for a substitute along with an explanation of any assistance they plan to provide during their leave
- 3. Current/updated resume from substitute teacher
- 4. Transcripts from substitute teacher (undergraduate and any/all graduate work completed unofficial copies are fine)

Fax to: College Now Program (507) 537-6472

Mail to: College Now, SMSU, 1501 State Street, Marshall, MN 56258 or E-mail: Jessica.Mensink@SMSU.edu