

**DELANO UNION SCHOOL DISTRICT
SUMMER SCHOOL
Supplemental Teacher Application**

Please ✓ position(s) you are applying for:

- | | |
|---|--|
| <input type="checkbox"/> GATE SUMMER ACADEMY TEACHER | <input type="checkbox"/> MIGRANT KINDER CAMP TEACHER |
| <input type="checkbox"/> MIGRANT SUMMER ACADEMY TEACHER | <input type="checkbox"/> SUMMER BRIDGE TEACHER |
| <input type="checkbox"/> SUMMER ESY MOD/SEVERE TEACHER | <input type="checkbox"/> SUMMER SCHOOL TEACHER |
| <input type="checkbox"/> SUMMER SPEECH PATHOLOGIST | <input type="checkbox"/> SS INTERV. <input type="checkbox"/> 6 th Grade ELA <input type="checkbox"/> 6 th Grade Math |
| <input type="checkbox"/> SUMMER SCHOOL NURSE | <input type="checkbox"/> SS INTERV. <input type="checkbox"/> 7 th Grade ELA <input type="checkbox"/> 7 th Grade Math |
| <input type="checkbox"/> SUMMER PSYCHOLOGIST | |

NAME: _____ DATE: _____

CURRENT POSITION _____ SITE: _____

CONTACT NUMBER (CELL): _____ (HM): _____

GRADE-SPAN PREFERENCE FOR TEACHING SUMMER ACADEMY (CHECK ONE ONLY):
PRESCHOOL K-1 2-3 4-5 6-8

IN THE SPACE BELOW, BRIEFLY DESCRIBE HOW YOU MEET THE CRITERIA FOR SELECTION OF STAFF LISTED ON JOB ANNOUNCEMENT. LIST ANY TRAINING OR EXPERIENCE. (Please be specific.)

REASONS YOU WOULD LIKE TO TEACH IN THE MIGRANT EDUCATION PROGRAM:

SIGNATURE: _____ DATE: _____

<p>I hereby recommend this candidate to teach in the Migrant Education Program. Yes <input type="checkbox"/> No <input type="checkbox"/> not at this time</p> <p>Principal Signature: _____ Date: _____</p>
