

The logo for Harding Fine Arts Academy features the word "harding" in a large, black, serif font. Above the letter "i" is a red brushstroke graphic. Below "harding" is the text "FINE ARTS ACADEMY" in a smaller, black, sans-serif font.

# harding

FINE ARTS ACADEMY

3333 N. Shartel, Oklahoma City, OK 73118  
(405)702-4322 FAX (405)601-0904

Dear Applicant:

Thank you for your interest in becoming a substitute teacher for Harding Fine Arts Academy. The requirements for becoming a substitute teacher are listed below.

- Application and background check forms completed and signed
- Copy of a current or prior teaching Certificate or Licensure, if applicable.
- Two forms of Identification (i.e.) Driver's License or State ID card, AND social security card or birth certificate, or passport– *(All forms of identification must be copied on site).*
- Payroll Information, completed after approval \*
  - W-4 Form
  - I-9 Form
  - Direct Deposit Form

\* Payroll and direct deposit forms can be obtained from the Harding Fine Arts Academy business office, Rm 201.

Your application will not be considered complete until all of the above information has been submitted. After your application is received, please allow 2 weeks for it to be processed. If your application is approved, you will be contacted by mail or e-mail.

Certified substitute teachers are paid \$80 per day; non-certified \$65. Payroll disbursements are made on the 15<sup>th</sup> and last day of the month for days worked prior to the payroll processing deadline.

Completed applications can be sent to:  
Harding Fine Arts Academy, Substitutes  
3333 N Shartel  
Oklahoma City, OK 73118

Thank you again for your interest in Harding Fine Arts Academy.

If you have questions, please contact Director of Operations, Ms. H.L. Watson ([hlwatson@hfaaokc.org](mailto:hlwatson@hfaaokc.org)) or Office Manager, Leslie Lanza ([llanza@hfaaokc.org](mailto:llanza@hfaaokc.org))

**Harding Fine Arts Academy Substitute Teacher Application**

3333 N. Shartel Avenue  
Oklahoma City, OK 73118

<b>FOR OFFICE USE ONLY</b>	
Date R'cvd	_____
OBI R'cvd	_____
OBI Sent	_____
OK Cert.	_____
W-4 Form	_____
I-9 Form	_____
ID(s)	_____
IPERS	_____
Direct Deposit	_____

**GENERAL INFORMATION**

**On what date you can start?** \_\_\_\_\_ **Today's Date** \_\_\_\_\_

How early in the morning may you be called? \_\_\_\_\_ How late in the evening may you be called? \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone (w/ area code): \_\_\_\_\_

Cell Phone (w/ area code): \_\_\_\_\_

Work/Other Phone (w/ area code): \_\_\_\_\_

E-mail address: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security No \_\_\_\_\_

**EDUCATION AND TRAINING**

	School Name and Location	From	To	Receive Diploma?	GPA	Major	Minor/Special Courses
High School or GED							
College or University (Undergrad)							
Graduate School							
Other Education							

**CERTIFICATION/LICENSES** - Substitute teacher applicants must list their certificate information if available and attach a copy to this application.

State	Type	Endorsement	Certificate/Folder #	Issue Date	Expiration Date

List any special skills, experience, or relevant organizational affiliations:

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**EMPLOYMENT RECORD or TEACHING EXPERIENCE:** Please list any teaching experience or student teacher assignments. BEGIN ON THE FIRST LINE WITH YOUR PRESENT OR MOST RECENT POSITION AND WORK BACK. ATTACH AN ADDITIONAL SHEET IF NECESSARY.

**PRESENT EMPLOYMENT:**

Are you presently employed? \_\_\_YES \_\_\_NO If not, please explain:

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Have you ever been employed by Oklahoma City Public Schools District? \_\_\_YES \_\_\_NO

If so, please indicate dates of employments and position

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1. Employer \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Position/Assignment

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From \_\_\_\_\_ To \_\_\_\_\_ Supervisor \_\_\_\_\_

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2. Employer \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Position/Assignment

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From \_\_\_\_\_ To \_\_\_\_\_ Supervisor \_\_\_\_\_

3. Employer \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Position/Assignment

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From \_\_\_\_\_ To \_\_\_\_\_ Supervisor \_\_\_\_\_

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**REFERENCES** - Please list the contact information for 3 business references, such as supervisors, co-workers, and subordinates.

<u>Name</u>	<u>Position/Business relationship</u>	<u>Organization Phone</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

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**In addition to your major and minor fields, in what classes/courses are you willing to substitute?** Please place a Y next to positions you will take, and an N next to positions you will not. If you do not mark anything it will be assumed you will not fill that position and those jobs will not be available to you.

___ Art (Visual)	___ Piano/Vocal Performance
___ Band/Orchestra/Guitar	___ Computer
___ Language Arts/English/Reading	___ Math
___ Martial Arts	___ Spanish
___ Science/Biology/Chemistry	___ French
___ Special Education	___ Social Studies/History/Economics
___ Drama	___ Dance
___ Photography/Videography	

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It is the policy of Harding Fine Arts Academy not to discriminate on the basis of race, creed, color, religion, national origin, gender, age, marital status, sexual orientation, gender identity, veteran status, disability, or socioeconomic status in its educational programs, activities, or employment practices.

The logo for Harding Fine Arts Academy features the word "harding" in a large, black, serif font. Above the letter "i" is a red, horizontal brushstroke with a white dot in the center. Below "harding" are the words "FINE ARTS ACADEMY" in a smaller, black, sans-serif font.

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FINE ARTS ACADEMY

3333 N. Shartel, Oklahoma City, OK 73118  
(405)702-4322 FAX. (405)601-0904

Applicant:

All applicants seeking to work with students at Harding Fine Arts Academy must undergo a criminal background check. Please complete and return the attached form with your application, which is a release allowing us to conduct a criminal background

investigation, and conduct a search of the Violent Offender Database and the Sex Offender Database. You may also find and complete the form on-line at

[http://www.ok.gov/osbi/documents/OSBI%20CRIMINAL%20HISTORY%20REQUEST%20FORM%20\(AUGUST%202009\).pdf](http://www.ok.gov/osbi/documents/OSBI%20CRIMINAL%20HISTORY%20REQUEST%20FORM%20(AUGUST%202009).pdf).

- The fee for this background investigation is \$19, which may **not** be paid by personal check. See the form for acceptable payment methods. If you pay by cashier's check or money order, please make it payable to the Oklahoma State Bureau of Investigation.
- To complete the form, please provide all of the information requested in the SUBJECT INFORMATION box (not the requestor information.)
- The attached forms will be kept in a location separate from your application.
- Return the attached form **and payment** to Harding Fine Arts Academy. **Do not submit the form to OSBI.**

# OKLAHOMA STATE BUREAU OF INVESTIGATION

Criminal History Record Information Request  
6600 North Harvey Place  
Oklahoma City, OK 73116  
(405) 848-6724  
(405) 879-2503 FAX  
[http://www.ok.gov/osbi/Criminal\\_History/](http://www.ok.gov/osbi/Criminal_History/)

**Type Of Search Requested:**

Name Based - \$15.00  
 Sex Offender - \$2.00  
 Mary Rippy Violent Offender - \$2.00  
 State Fingerprint-based - \$19.00  
*\* Must provide fingerprint card.  
\* Includes name based search.*

DATE \_\_\_\_\_

Request Submitted via:  
 Fax  Mail  In Person

**Requests will be returned in the manner received.**

Mail requests should include postage-paid reply envelope.

Fax requests must include payment by credit card and a dedicated Fax Phone Line for return of completed search:  
( ) \_\_\_\_\_

**ACCEPTABLE FORMS OF PAYMENT:**  CASH  CASHIER'S CHECK / MONEY ORDER  
 BUSINESS CHECK *No Personal Checks Accepted.*  CREDIT CARD *For Visa, MasterCard and Discover, security code is 3 digits on back of card. For Amex, security code is 4 digits on front. These are the only cards accepted.*

CREDIT CARD # \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_ SECURITY CODE \_\_\_\_\_

CARD HOLDER \_\_\_\_\_  
*Please print the name of the individual card holder as it appears on the credit card.*

CARD HOLDER SIGNATURE (REQUIRED) \_\_\_\_\_

**REQUESTOR INFORMATION: (Type or print clearly in blue or black ink)**

REQUESTOR'S NAME Harding Fine Arts Academy HL Watson  
Digitally signed by HL Watson  
DN: cn=HL Watson, o=Harding Fine Arts Academy,  
ou,email=hlwatson@hfaaokc.org, c=US  
Date: 2014.09.17 14:32:14 -0500

STREET ADDRESS 3333 N Shartel  
Oklahoma City OK 73118  
CITY STATE ZIP

PHONE NUMBER (405) 702-4322 E-MAIL ADDRESS hlwatson@hfaaokc.org  
*Requestors outside of the United States are strongly encouraged to provide an e-mail address for purposes of correspondence.*

PURPOSE OF REQUEST \_\_\_\_\_

SIGNATURE OF REQUESTING PARTY \_\_\_\_\_

**SUBJECT INFORMATION: (Type or print clearly in blue or black ink)**  
*Forms with corrections done with white out or by striking through the fields in this section will not be processed.*

NAME \_\_\_\_\_  
LAST FIRST MIDDLE

ALIAS/MAIDEN NAME(S) \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ (MM/DD/YYYY). *If date of birth is unavailable, include exact age of subject.*

RACE \_\_\_\_\_ SEX \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

**SEARCH RESULTS (Please do not write in the spaces below):**

Oklahoma State Bureau of Investigation Computerized Criminal History	Oklahoma Department of Corrections Sex Offender	Oklahoma Department of Corrections Violent Offender
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*Unless fingerprint cards are provided, record information is furnished solely on the basis of name or description similarity with the subject of your inquiry.*

*For questions on the Sex Offender / Violent Offender Registry, please contact the Oklahoma Department of Corrections.*