

## School Board of Polk County Substitute Teacher Request for Reinstatement

### Personal Information

<b>SSN:</b>	<b>SAP:</b>	<b>US Citizen:</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Birth date:</b>
<b>Last Name:</b>	<b><u>First Name:</u></b>		<b>Middle:</b>
<b>Street Address or P.O. Box:</b>	<b><u>City:</u></b>	<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>	<b><u>E-mail address:</u></b>	<b>Gender (optional):</b> Male <input type="checkbox"/> Female <input type="checkbox"/>	

### LEGAL DISCLOSURE

#### **SEALED/EXPUNGED RECORD(S) (List ONLY Sealed or Expunged Records in This Section)**    **YES**        **NO**

Have you ever had any record **sealed or expunged** in which you were **convicted**, found **guilty**, had **adjudication withheld**, entered a **pretrial diversion program**, or **pled guilty** or **nolo contendere** (no contest) to a criminal offense other than a minor traffic violation (**DUI is NOT** a minor traffic violation)? If you check the **YES** box, you must give the information requested for each charge. Please attach a separate sheet with your name and social security number if you need more space.

City in which Arrested	State	Date of Arrest	Charge(s)	Disposition(s)

#### **CRIMINAL OFFENSE RECORD(S)**    **YES**        **NO**

Have you ever been **convicted**, found **guilty**, had **adjudication withheld**, entered a **pretrial diversion program**, or **pled guilty** or **nolo contendere** (no contest) to a criminal offense other than a minor traffic violation (**DUI is NOT** a minor traffic violation)? If you check the **YES** box, you must give the information requested for each charge. Please attach a separate sheet with your name and social security number if you need more space.

Report any record other than **SEALED or EXPUNGED** records in this section.

City in which Arrested	State	Date of Arrest	Charge(s)	Disposition(s)

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

SSN: \_\_\_\_\_

**PROFESSIONAL SANCTION**     **YES**                     **NO**

Have you ever had any professional license (a driver's license is not a professional license) or a professional certificate, including a teaching certificate, sanctioned by the issuing agency in this or any state? Sanction is defined to include: **suspension; revocation;** discipline, such as issuance of a **reprimand** or **fine;** or, otherwise conditioned, such as placed on any **restriction** or **probation.** Have you ever **resigned, surrendered,** or otherwise relinquished a professional license or certificate in this or any state? Is there **any action pending** in this or any state against a professional license or certificate you hold or held? Is there any action pending in this or any state against an application for a professional license or certificate you have on file? (A determination of academic ineligibility is not considered denial of a license or a certificate.)

If **YES** to any of these questions, you must give the state, year, license or certificate, issuing agency, and reason in which such action occurred.

State: \_\_\_\_\_ Year: \_\_\_\_\_

Certificate or License: \_\_\_\_\_

Issuing Agency: \_\_\_\_\_

Reason: \_\_\_\_\_

**AFFIDAVIT**

*I do hereby certify that I subscribe to and will uphold the principles incorporated in Constitutions of the United States of America and of the State of Florida.*

*I do hereby affirm that all information provided in my Request for Reinstatement is true, accurate, and complete.*

\_\_\_\_\_

Signature of Applicant

Date

WARNING: GIVING FALSE INFORMATION On your Request for Reinstatement may result in permanent removal of your name from the District's list of approved substitute teachers.