

SUBSTITUTE TEACHER APPLICANT REQUEST/APPROVAL FORM



APPLICANT NAME: _____

The Berks Career and Technology Center (BCTC) received your request to be approved as a substitute teacher. Below is a listing of all BCTC's programs. Please indicate those program areas in which you are requesting to serve as a substitute teacher. There are two (2) types of substitute approval: lab and generic. Below are the definitions of each:

Lab Teacher = occupationally qualified practitioner; received formal training in and has worked a minimum of two years beyond the training period in the occupational field; under the supervision of the substitute teacher, students will be permitted in the laboratory working with equipment on assigned projects.

Generic Teacher = approved to substitute as a classroom teacher only; certified as a teacher and/or has training and experience working with high school age children in a formal classroom setting; will supervise guided study only in assigned classroom area. Under no circumstances shall this individual supervise or instruct students in laboratory activities. While assigned to that area, power to the laboratory must be turned off and students shall remain in the classroom during the entire session.

Place a check mark in the lab or generic box based on your expertise. If you have technical background and experience in one or more program areas, indicate by checking the "lab" box. If you do not have occupational expertise in a program area, but have the skills to work with students in a classroom setting on guided study, indicate by checking the "generic" box.

If your application packet does not contain background experience that supports your selections, please attach appropriate documentation that supports your experience. Your application package and related documentation will be evaluated and approved based on your experience.

Note: A summary of all programs can be reviewed on BCTC's website at www.berkscareer.com (click "Programs" tab then click "37 Career Programs")

CTE PROGRAMS (NON-DEGREE):

FOR INTERNAL USE ONLY

BUSINESS & INFORMATION TECHNOLOGY

Lab	Generic	Program	Approval Signature/Date	Notes
<input type="checkbox"/>	<input type="checkbox"/>	Computer Systems Networking & Security	_____	_____

COMMUNICATIONS

Lab	Generic	Program	Approval Signature/Date	Notes
<input type="checkbox"/>	<input type="checkbox"/>	Advertising Art & Design Technology	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Communication Media Technology	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Graphic Imaging Technology	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Photo Imaging Technology	_____	_____

CONSTRUCTION

Lab	Generic	Program	Approval Signature/Date	Notes
<input type="checkbox"/>	<input type="checkbox"/>	Building Construction Occupations	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Cabinetry & Wood Technology	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Carpentry	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Electrical Occupations	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	HVAC/Refrigeration	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Masonry	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Painting & Decorating	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Plumbing & Heating	_____	_____

ENGINEERING & MANUFACTURING TECHNOLOGY

Lab	Generic	Program	Approval Signature/Date	Notes
<input type="checkbox"/>	<input type="checkbox"/>	Computerized Machining Technology	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Drafting Design Technology	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Electronic Engineering Technology, Mechatronics Engineering, Robotics & Automation Technology	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Precision Machining Technology	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Welding Technology	_____	_____

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Continued

CTE PROGRAMS (NON-DEGREE):

FOR INTERNAL USE ONLY

HEALTH CARE

Lab	Generic	Program	Approval Signature/Date	Notes
		Dental Occupations		
		Health Occupations		
		Medical Health Professions		
		Sports Medicine & Rehabilitative Therapy		

SERVICES

Lab	Generic	Program	Approval Signature/Date	Notes
		Cosmetology		
		Culinary Arts		
		Horticulture		
		Protective Services–Homeland Security/ Law Enforcement		

TRANSPORTATION

Lab	Generic	Program	Approval Signature/Date	Notes
		Automotive Collision Repair Technology		
		Automotive Technology		
		Diesel Technology		
		Heavy Equipment Technology		
		Recreational & Power Equipment Technology		

To be considered a substitute teacher in the programs listed below, you **must have a minimum of a Bachelor's degree**:

CTE PROGRAMS (DEGREE):

FOR INTERNAL USE ONLY

Lab	Generic	Program	Approval Signature/Date	Notes
		Business Management & Entrepreneurship		
		Early Childhood Education		
		IT Programming		
		Service Occupations		

I verify that I have the background and expertise to substitute in the above program areas as indicated.

Substitute Candidate Signature

Date

Please mail or email completed form along with any background experience that supports your program selections to:

Human Resource Department
Berks Career and Technology Center
1057 County and Welfare Road
Leesport, PA 19533
Via email: hr@berkscareer.com

Any form completion questions can be directed to Human Resources at 610-743-7645.