

SUBSTITUTE CHECKLIST

Name _____ Phone Number _____

Emergency
Contact _____ Phone Number _____

Indicate desired schools: ___ DuJardin (K-5) ___ Erickson (K-5) ___ Westfield (6-8)

___ Educator License is registered with DuPage ROE

___ If you have a Paraprofessional License and a Bachelor's Degree, please request
official college transcripts be sent to:
Dr. Evonne Waugh, 164 Euclid Ave, Bloomingdale IL 60108

___ Current Health Exam and TB Test

___ DCFS Form

___ Race and Ethnicity Form

___ Federal and Illinois W-4 Forms

___ TRS Form – Certified Teachers Only

___ New Employee Pension Questionnaire

___ Social Security Form

___ Employment Eligibility Verification, Form I-9
Bring your Driver's License and Social Security Card with completed Page 1

___ Criminal Background Check
The State of Illinois requires all applicants to be fingerprinted for background check.
Please make an appointment with Bloomingdale School District 13 Human Resources:
(630) 893-9590