

NAME: _____

SUMMER SUBSTITUTE CLASSROOM AIDE (NEW TO ETSD)

_____ **APPLICATION – Complete an online application through our website.**

_____ **COPY OF TRANSCRIPTS SHOWING AT LEAST 60 COLLEGE CREDITS. Skills assessment testing may be taken in lieu of college credits. Call 856-983-1800 x5104 to schedule testing.**

_____ **I-9 with documentation. Bring in original documentation so that we may make a verify and make a copy.**

_____ **SOCIAL SECURITY CARD. Bring in original social security card so that we may verify and make a copy.**

_____ **W-4's FEDERAL and NJ**

_____ **DIRECT DEPOSIT APPLICATION and COPY OF A VOIDED CHECK, OR DIRECT DEPOSITION AUTHORIZATION FROM YOUR BANK.**

_____ **TB / MANTOUX TEST**

_____ **FINGERPRINTING**

_____ **INJURY REPORTING FORM**

_____ **PERSONNEL DATA REQUEST FORM**

_____ **HIB CERTIFICATE**

_____ **AFFORDABLE CARE ACT**

_____ **SEXUAL MISCONDUCT/CHILD ABUSE DISCLOSURE RELEASE**

_____ **CHILDREN IN WHICH SCHOOLS? _____**