



**AVID Lead Teacher
Extra Duty Application
2019-2020 School Year**

Site	Grade	Subject
Last Name, First Name	Email Address	
Cell Phone Number	Work Phone Number	

Professional References (include only those who have knowledge of your teaching experience, i.e. administrators, supervisors, etc.)		
Name	Position	Phone Number

Teaching Experience (list most recent assignment first)							
Assignment	Dates		# of Months	Subjects	School	District	Private or Public
	From	To					

Total years of teaching _____

Signature of Applicant	Date
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