SUPPLEMENTAL POSITION LETTER OF INTEREST

(Date)	, please accept tl	nis letter of
interest for the supplemental position of		
during the 20	025-2026 school year	for the
Clear Fo	rk Valley Local Scho	ools.
(Print Name)	(Signature)	(Date)
(Print Name)	(Signature)	(Date)
(Print Name) (Principal's Signature)	(Signature) Date	. ,
(Principal's Signature)		
	Date	