Long-Term Substitute Request form

☐ MW  ☐ MOH  ☐ MS  ☐ HS

SUBSTITUTES INFORMATION

Candidate's Name______________________________________

*Teaching Responsibilities Begin ________________         __________

  Date        # of Days

**Shadowing/Transition Responsibilities Begin ________________       __________

  Date                        # of Days

Expected End Date________________________

EMPLOYEE INFORMATION

Employee Taking Leave  __________________________________________

Date Employee Will Begin Leave ____________________________________

Date Employee Expects to Return from Leave________________________

This letter should be sent to the SAU office along with the following:
  • completed application
  • resume packet
  • copy of certification
  • 2-3 documented verbal references

*Long-term substitutes, working longer than 31 consecutive days, will be paid at the BA Step 1 Rate of the current salary schedule, except during shadowing/transition time.

**Up to three days will be allowed for shadowing/transition time with the teacher that will be going on leave. The purpose of the shadowing/transition time is to review curriculum and units of instruction, and to meet the students. This time will be compensated at the current sub rate of $75.00 per day.

Principal’s Signature ____________________________  Date ____________

Approved 2-19-08