

SUBSTITUTE TEACHER REQUEST

_____ needing a sub for _____
(Teacher's Name) (Date)

List your class schedule and conference time:

Blue Day Gold Day

1. (8:00-9:24) _____ 4. (11:40-1:32) _____

2. (9:28-10:52) _____ 5. (1:36-3:00) _____

3. (10:56-11:36) _____ Seminar

PLC Wednesday

1. (8:00-9:12) _____ 4. (11:01-12:28) _____

3. (9:16-9:41) _____ Seminar 5. (12:32-2:00) _____

2. (9:45-10:57) _____

Green Day

1. (8:00-8:44) G1 _____ 5. (11:08-12:15) G4 _____

2. (8:47-9:31) B1 _____ 6. (12:18-1:26) B4 _____

3. (9:34-10:18) G2 _____ 7. (1:29-2:13) G5 _____

4. (10:21-11:05) B2 _____ 8. (2:16-3:00) B5 _____

Reason for Absence: _____

Please charge this day to (check ONE):

- | | |
|-------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Sick Day | <input type="checkbox"/> Full Day |
| <input type="checkbox"/> Personal Day | <input type="checkbox"/> Half Day (morning or afternoon) |
| <input type="checkbox"/> Professional Day | <input type="checkbox"/> Other |

The substitute will be paid out of which fund (check ONE):

- Regular Funds
 PDC Funds
 Other _____

Principal's Approval: _____

Substitute: _____