



**COLLEGE COMMUNITY SCHOOLS
LONG TERM SUBSTITUTE TEACHER FORM**

Please use this form for any long term substitute teachers that are going to be placed on the salary schedule. *All long term subs must be registered with Sub Central.* Please fill out prior to teacher's long term absence and send to Director of Human Resources.

Name of Long Term Substitute _____

Name of Teacher _____ Building _____

Starting Date _____ Anticipated end date _____

CONTRACTED TEACHING EXPERIENCE WITHIN THE LAST FIVE YEARS

DISTRICT	DATES
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Substitute teachers are given credit for contracted teaching experience within the last five years using the co-curricular Base and BA Lane multipliers only. Copies of signed contracts are required for documentation of contracted teaching experience.

Building Administrator signature _____

Date _____

.....

CENTRAL OFFICE: BA 1 2 3 4 5 Salary\$ _____

Divided by 190 days =

Daily Rate \$ _____