Broward County Public Schools

REF#

SUB CENTRAL

INTERIM SUBSTITUTE RECOMMENDATION SHEET

Scan as an iForm Attachment Job Class-080101

School Name		Location Number	
Interim Substitute Teacher's Name		Personnel Number	
Grade/Subject			
		EPLACING ompletely For Faster Processi	ng
Teacher's Name		Personnel Number	Position Number
ANTICIPATED DATES OF ABSENCE: Start Date:End Date: * Create an iForm to delimit the position when the teacher returns.		End Date:	
REASON FOR ABSENCE /JUSTIFICATION TO USE AN INTERIM SUBSTITUTE: (CHOOSE ONLY ONE)			
□ FMLA	☐ Illness	NLY ONE) □ Worker's C	omn.
NOTE: An Interim Substitute for an Unfilled or Vacant Position must be pre-approved by the Area Superintendent.			
□ Maternity	□ Personal	□ Other (Not Listed)	
PRINCIPAL'S SIGNATURE * Required for ALL positions		AREA SUPERINTENDENT'S SIGNATURE * VACANT OR UNFILLED POSITIONS ONLY	
more and holds a Bachelo	or's Degree. The in	nterim substitute must be	r at least 20 consecutive days or entered into SmartFind Express y the job in SmartFind Express.
JOB ASSIGNMENT NUM	MBER:		
Sub Central will enter the them to be able to call in al *The additional PIN is no lon	osences and obtain s	substitutes.	Express as teachers in order for abstitute.
CONTACT'S NAME		PHONE NUMBER	DATE SUBMITTED
Comment:			
For Office Use:	Approved	Not App	proved