## Regional Office of Education #3 ~ Bond, Christian, Effingham, Fayette & Montgomery Counties



Julie Wollerman, Regional Superintendent of Schools Annette Hartlieb, Assistant Regional Superintendent of Schools

## Request for Authorization to Employ Substitute Teacher in an Emergency For No Longer than 30 Days

IEIN/SS#	Name:				Phone:		
Street Address:							
City:		Stat	te: Zip Cod		le:		
Circle one: PEL, ELS, Sub		License #:					
District Information – All Parts Must be Completed							
School Name and District:						Phone:	
School Address:							
City:		State:		Zip Code:			
Reason for Emergency:							
Grade Level and Subject area of position being filled:							
Start Date:			Projected End Date:				
As administrator of this entity, I certify that I have been unable to secure the services of an appropriately certificated or approved educator and that any approved individuals interviewed did not meet district criteria for hire.							
<u>District Superintendent Signature:</u>			Date:				
Regional Superi	ntendent Signature:		Date:				