

 **Granville County**

 PUBLIC SCHOOLS

 *“Committed to Excellence and Achievement for All”*

School:      Date:      \_\_\_\_\_\_\_\_\_\_\_\_

Employee:       Grade/Subject:      \_\_\_\_\_

Reason for Long-Term Substitute:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Efforts made to fill position (if vacant):      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of Days Requested:       days (Minimum- 10 days)
**(NOTE: The amount of days requested should match the attached medical or FMLA note.)**

Dates Substitute Needed:      \_\_\_\_\_ through      \_\_\_\_\_

Name of Substitute Teacher:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Certified [ ] Yes [ ] No [ ] N/A If yes, in what area?      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Highly Qualified in area of assignment? [ ] Yes [ ] No [ ] N/A

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Principal or Designee Signature*

**FOR OFFICE USE ONLY**

\*\*\*PLEASE SUBMIT FORM DIRECTLY TO HUMAN RESOURCES @ (919) 693-6305\*\*\*

Number of Days Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 *Director of Human Resources or Designee*

Post Office Box 927– 101 Delacroix Street– Oxford, NC 27565 – 919 693 4613 – www.gcs.k12.nc.us