

SUB REQUEST/TIME OFF FORM

Date _____

Print your name _____

Day(s) you are requesting off _____

Classroom _____ Hours to be covered by Substitute _____

Request submitted in ADP: Yes No

- ALL REQUESTS MUST BE ENTERED INTO ADP.
- THE HOURS APPROVED IN ADP ARE THE HOURS YOU WILL BE PAID FOR.
- YOU ARE STILL REQUIRED TO GET APPROVAL FROM YOUR FELLOW TEACHERS PRIOR TO ADMINISTRATIVE APPROVAL.
- **ENTERING A REQUEST INTO ADP DOES NOT REPLACE THE PAPER FORM WITH APPROVAL SIGNATURES. BOTH ADP AND PAPER ARE REQUIRED.**

Reason for your absence:

Substitute Request (please request a sub that you feel is a good match for your classroom and knows your children)

By signing this form, I understand that my regularly scheduled hours may need to be altered or extended to accommodate this requested absence.

Lead Teacher

Classroom Teacher

Classroom Teacher

Classroom Teacher

**Lead Teachers: Please double check your classroom's schedule before approving any time off.
Only one teacher can be absent per day per classroom.
When possible, please re-arrange shifts so that a familiar face is in the class for drop off.**

Approved / Unapproved Date: _____

Notified: Request Logged in Calendar:

Request approved in ADP: