



KATHRYN JENNINGS
Regional Superintendent of Schools

EMILY ADOLPHSON
Assistant Regional Superintendent of Schools

SCHOOL REQUEST FORM

Please check the school district(s) in which you wish to substitute:

- | | | |
|--|---|--|
| ☐ Abingdon-Avon | ☐ Mercer County | ☐ Williamsfield |
| ☐ Costa | ☐ Monmouth-Roseville | ☐ RAES East (Galesburg) |
| ☐ Galesburg | ☐ ROWVA | ☐ RAES West (Monmouth) |
| ☐ ICS | ☐ United | ☐ Knox-Warren Special Ed. |
| ☐ Knoxville | ☐ West Central | |

Adult Education Courses-*English as a Second Language

- | | | |
|--|------------------------------|--------------------------------|
| ☐ Monmouth GED-HSE | ☐ Day | ☐ Night |
| ☐ Galesburg GED-HSE | ☐ Day | ☐ Night |
| ☐ Monmouth ESL* | ☐ Day | ☐ Night |
| ☐ Galesburg ESL* | ☐ Day | ☐ Night |

Contact Information:

Name: _____ Email: _____

Address: _____ Phone: _____

City, State, Zip: _____

Check the grade levels/areas you are willing to substitute for:

- | | | |
|---|--|--|
| ☐ Pre-K/Early Childhood –
must have TB test | ☐ 4 th | ☐ 10 th |
| ☐ Kindergarten | ☐ 5 th | ☐ 11 th |
| ☐ 1 st | ☐ 6 th | ☐ 12 th |
| ☐ 2 nd | ☐ 7 th | ☐ Special Education |
| ☐ 3 rd | ☐ 8 th | ☐ Paraprofessional |
| | ☐ 9 th | |

List special instructions, i.e., days you are not available to work, or schools you don't wish, etc.:

I understand that it is my responsibility to keep my contact information updated with the Regional Office of Education to ensure my information is correct on the ROE #33 Sub List. I also understand that my information being included on the Sub List does not guarantee employment, and that any employment that does occur will be directly with the individual school districts. I will not be hired or compensated by the Regional Office of Education #33.

Printed Name

Signature

Date