## Revised 10/2021

## CATEGORY II REQUEST FORM CERTIFIED SUBSTITUTE TEACHER

## **Important Notes for School Administration & Substitute:**

All requests for Category II Substitutes must be pre-approved by the Division of Human Resources prior to the first day worked. Do not commit to pay the higher rate of pay until approved by Human Resources.

Category II Substitute must have a current Alabama Teaching Certificate in the field of the assignment. Substitutes <u>must present School Administration with a Professional Substitute Card.</u>

Substitute must serve for the same teacher for more than 20 consecutive days before Category pay begins. Pay will be retroactive to the first day worked and will be paid on the regular payday for the attendance period in which the 21<sup>st</sup> day is met.

Name of School:	
Name of Category II Substitute Teacher:	
Employee Number:	Date Assignment begins:
Information on Teache	er the Substitute is replacing
Name:	Assignment:(Sub must be certified in the field and grade level of the assignment)
Employee Number:	
Reason for absence:	Request for Leave on file:
•	Anticipated return:(Sub should not teach in this position for longer than one semester)
Principal's Signature	Date
	Division of Human Resources
Valid Alabama Teacher Certific	cate Area of Certificate
Background Check Reviewed	SLB Notified
Active Professional Sub Card	PA Notified
Personnel Administrator	Date Approved
Date Authorization to Payroll:	Attn:
Pay \$175.00 per day retro t	:o:
<ul> <li>□ Notified school</li> <li>□ Verified sub worked 20 consecutive days</li> <li>□ Absent-Use date of:</li> </ul>	
□ Denied/Reason:	Personnel Administrator