PLEASE COMPLETE AND RETURN THIS FORM

SUBSTITUTE QUESTIONNAIRE

Name_____

Address_____

Telephone Number_____

PLEASE CHECK ONE OF THE OPTIONS BELOW:

_____**YES**, I am currently available and interested in employment as a substitute for the 26-27 school year

_____**NO**, I am not interested in substituting for Laurens Central School for the 2026-27 school year.

Days Available (please check all days you are available)

☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

I am interested in substituting for the following position;

☐ Teacher ☐ Aide ☐ Cafeteria ☐ Transportation ☐ Maint./Cleaner ☐ Nurse

Only available certain times of school year (Please indicate) _____

_____

Are you registered with any other school districts for substitute employment? _____

If yes, which one(s)?_____

Do you have your NYS certification _____ Area Certified _____

Are you available on short notice? _____

Do you have fingerprint clearance as per the NYS SAVE Regulations? _____
(*If the answer is no, you will need to visit https://uenroll.identogo.com/workflows/14ZGR7 and make an appointment to have your fingerprints taken. There is a $**102.00** processing fee and you will be responsible for this cost. The location for fingerprinting is ARC 35 Academy Street, Oneonta, NY. After you have had your fingerprints taken, please contact Pam Weir at 607-432-2050 Ext. 1120 so she can complete the process.)

I understand and agree to notify Pam Weir, Superintendent's Office (607-432-2050, Ext. 1120), if any of the above conditions change.

_____ _____

Date Signature