

Amount: _____

Employee Number #: _____

Org/Obj: 1 _____ 12950 51339
School Number

Employee Name _____
Print Name of Teacher whom students were assigned to

The classroom teacher is absent in an elementary school and no substitute teacher is available. The absent teacher's students are distributed among teachers in the school:

PLEASE PRINT

(One sheet per teacher per day)

1. **Total** number of students in **absent teacher's** class that day: _____

2. Name of **absent teacher**: _____ Date absent: _____

3. Did absent teacher's students go **with your students** to your Itinerant? Yes _____ No _____

4. Did absent teacher's students go **to their scheduled** itinerant? Yes _____ No _____

If so, who (name) _____ Subject _____

# of Students Assigned to you from absent teacher	How Long Assigned to you (actual hrs.) Maximum time 6.25 hrs.

Principal's Signature: _____ School _____ Date: _____

Equal Opportunity Employer

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