EL DORADO UNION HIGH SCHOOL DISTRICT

Certificated Substitute Request

(For reasons other than illness or personal necessity,
this form must be filled out by all employees requesting a substitute teacher.)

Requests for substitutes are to be telephoned in to AESOP (800) 942-3767 or on-line at https://www.frontlinek12.com/aesop as soon as the need is known. If your class is covered in-house, then enter 'no sub required' and put the teacher's name under 'Notes to Administrator.' This form must be completed by the teacher, approved by the Principal, and retained by the Principal's administrative assistant.

All absences should be submitted to AESOP,
even if it is covered in-house or no substitute is needed.

All cancellations must be telephoned to AESOP prior to the date the substitute was needed and reported to the Principal's administrative assistant.

I am requesting a substitute for the following dates for the purpose listed below:

DATES ABSENT	WHICH PERIODS	NAME OF SUBSTITUTE	DATE ENTERED INTO SUB FINDER

☐ Workshop *(Title)*: _____

☐ Meeting *(Title)*: _____

☐ Coach/Sport: _____

☐ Department Chair – Department Name:

_____

☐ IEP/504 _____

☐ Other, specify: _____

Charge to Budget Code: _____
(Note—It is the employee's responsibility to provide budget code.)

_____ ***x*** _____ _____
Print Employee Name *Employee Signature* *Date*

x _____ _____ Approved ☐ Not Approved ☐
Site Administrator Signature *Date*

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