Substitute Teacher Site Exclusion Request

Please fill out the following form and either email it or print it out to Emily Theodorson, Substitute Specialist (theodem@boe.richmond.k12.ga.us). All requests must be from either the school Principal or Assistant Principal. A reason must be given (*) or checked for the Substitute to be removed. The Substitute will not be removed from your school until this form has been received.

The Confirmation # and date of job must be entered for the exclusion to be processed.

Substitute's Name School	
Frontline Confirmation ID#	Date of Job//
Discussed this concern/conflict with Substitute?	
Reason(s) for Exclusion Request (* requires explana	Date Conference occurred (If applicable) ation and/or statements):
*Unable to control class	*Inappropriate dress
Failure to show	*Inappropriate language
Sleeping in class	*Inappropriate conduct
Use of Cell phone in front of students	*Harassment
Continually Tardy without notification to school	Inappropriate use of Computer
*Other (Please explain below)	Leaving students unattended
Please indicate were you want them excluded Other:	Whole SchoolClassroom
Please explain:	
Signed Date Date	
Rich County Sch	mond