

Substitute Site Exclusion Request

Please fill out the following form and either email it or print it out and fax it to Kathryn Young, Subfinder Operator (youngka@boe.richmond.k12.ga.us) (Fax: 706-826-4632). All requests must be from either the school Principal, 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.**

Substitute's Name _____ School _____

Aesop Confirmation # _____ Date of Job ____/____/____

Discussed this concern/conflict with Substitute? _____. ____/____/____
Date Conference occurred (if applicable)

Reason(s) for Exclusion Request (please check one or explain):

Smoking _____

Failure to show ____

Drugs/Alcohol ____

Use of Cell phone in front of students ____

Inappropriate language ____

Continually Tardy without notification to school ____

inappropriate conduct ____

Inappropriate use of Computer ____

inappropriate dress ____

Other__ (Please explain below):

Signed _____
(Principal or Assistant Principal's name)

Date ____/____/____

