BOARD OF EDUCATION SUSSEX-WANTAGE REGIONAL SCHOOL DISTRICT

27 Bank Street Sussex, NJ 07461 973-875-3175 FAX: (973) 875-7175

REQUEST TO SUBSTITUTE IN THE 2023-2024 SCHOOL YEAR

Name:	
Email:	
Phone Number:	
Please indicate your choice for the upcomi	ng 2023-2024 School Year and sign below:
· · · · · · · · · · · · · · · · · · ·	tive substitute in the Sussex-Wantage Regional ear in the following position(s) (please check all that
TEACHER TEACHER ASSISTANT (Includes CI SECRETARY BUS DRIVER and/or VAN DRIVER CUSTODIAN NURSE CARE PROGRAM (Includes BEFOR	assroom / Bus or Van Aide / Café/Playground) RE and/or AFTER and/or SUMMER)
Regional School District. I understand that	e active substitute listing for the Sussex-Wantage should I wish to be a substitute in the future I may
have to re-apply.	
Signature	Date

Please return the completed form to Brenda VanWarner at the Board of Education office <u>no</u> <u>later than April 06, 2023</u>. You may return this form by mail, interoffice mail, email at <u>bvanwarner@swregional.org</u>, fax or in person.

PLEASE BE AWARE that if no response is received from you by the deadline noted above, it will be assumed that you do not wish to continue as a substitute in the Sussex-Wantage Regional School District and you will not be approved to sub in the upcoming school year. Should you later wish to be an active substitute after removal from the list you may be required to re-apply which may require being re-fingerprinted.

Thank you in advance for your prompt response!