

**SCHOOL DISTRICT OF COLBY
TEACHER SUBSTITUTE VERIFICATION 2023-2024**

NAME

DATE

ADDRESS

EMAIL ADDRESS

CITY STATE ZIP

PHONE

BY _____ AM
PREFERRED CALLING TIME

_____ I am interested in subbing for the 2023-2024 school year.

_____ I am **NOT** interested in subbing for the 2023-2024 school year.

License on file? _____ YES _____ NO

License expired? _____ YES _____ NO

If you do not have a license on file or the one on file is an expired copy, please send a copy of your current Wisconsin License.

If your license has expired or you do not have one, please apply for one and send me a copy as soon as you receive it.

_____ My license has expired, but I am applying for a new one.

_____ I do not have a license, but I am applying for one.

The School District of Colby cannot employ substitutes who do not have a valid Wisconsin teacher or substitute license on file.

Return to: Sara Uhlig
 Colby Public Schools
 PO Box 110
 Colby WI 54421
 suhlig@colby.k12.wi.us

Name _____

DEGREE INFORMATION

HIGHEST DEGREE COMPLETED _____

TYPE OF DEGREE _____

GRADE LEVEL WILL SUBSTITUTE

| <u>PRE-SCH</u> | <u>SPEC. ED</u> | <u>K</u> | <u>1</u> | <u>2</u> | <u>3</u> | <u>4</u> | <u>5</u> | <u>6 - 8</u> | <u>9 - 12</u> |
|----------------|-----------------|----------|----------|----------|----------|----------|----------|--------------|---------------|
| | | | | | | | | | |

GRADE LEVEL WILL NOT SUBSTITUE

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SCHOOLS

COLBY ELEMENTARY

COLBY MIDDLE SCHOOL

COLBY HIGH SCHOOL

LITTLE STARS PRESCHOOL -4K

YES

NO

| | |
|--|--|
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| | |

Preferred substitute area or subject matter _____

Area or subject matter NOT interested in _____

Additional Information _____

Signature: _____ Date: _____