

BOARD OF COOPERATIVE EDUCATIONAL SERVICES
RECOMMENDATION FOR PAYMENT OF PER DIEM SUBSTITUTE Revised 10/15

This recommendation is to be used for payment of per diem substitutes who have been employed for the same staff person for 20 consecutive days. The 21st commences the daily rate of Step 1 payment for teachers, teaching assistants, teaching assistants for crisis intervention, teacher aides and interpreters.

TO: Richard M. Hooley Ed.D., District Superintendent

FROM: _____
Signature of Program Administrator

DATE: _____

I am recommending the following person for payment as a per diem substitute:

NAME: _____

JOB TITLE: _____

DIVISION: _____ PROGRAM: _____ LOCATION: _____

PROGRAM BUDGET INFORMATION:

CODE: _____

SUBSTITUTING FOR: _____ DATE SUBSTITUTE BEGAN: _____

EFFECTIVE DATE OF 21st CONSECUTIVE DAY OF SUBSTITUTE SERVICE: _____

PAYMENT: _____
(The daily rate of Step 1)

APPROVED DISAPPROVED _____ DATE: _____
Program Director

APPROVED DISAPPROVED _____ DATE: _____
Director of Human Resources

✿FORWARD RECOMMENDATION FORM AND ALL PERTINENT APPLICATION MATERIALS TO HUMAN RESOURCES✿

- ◆ A snow day or holiday will not constitute a break in time when a substitute is accumulating the 20 days toward per diem.
- ◆ After 21 days, should there be a break such as sickness or personal time, the rate of pay will revert back to the substitute rate.