

**Michigan Conference of Seventh-day Adventists
SUBSTITUTE TEACHER REIMBURSEMENT FORM ***

INSTRUCTIONS: This form should be sent to the Conference Office of Education on the 10th of each month with the principal's monthly report. After receiving this form, the Conference Treasury will send a payroll check directly to the substitute teacher. The Conference Treasury will also send a statement to the school treasurer indicating the amount due for 50% of all absences which are defined to be those shared with the Conference. Any Conference-required appointment by the Office of Education will be reimbursed at 100%.

SCHOOL AND TEACHER DATA

Name of School: _____ Date: _____

Regular Teacher's Name: _____

Substitute Teacher's Name: _____

Current Certification Lapsed Certification No Certification

	DATE	REASON	PAY
Days Taught:			

TOTAL DAYS SUBSTITUTED _____ x _____ = _____

Make copy for school

Send this form to:

Office of Education
Michigan Conference
5801 W. Michigan Ave.
Lansing, MI 48917

Regular Teacher's Signature: _____

Principal's or Treasurer's Signature: _____

Approval of Superintendent: _____

School Charge \$ _____

Sick/Personal \$ _____

Other \$ _____

* Substitute teachers must be a minimum of 21 years old.