

Hardeman County Schools
Substitute Teacher - Additional Weekly Hours Request

*This form must be submitted to the Principal of the building where additional hours are requested **prior to** working the additional hours.
Failure to obtain approval may result in non-payment for those hours.*

Substitute requested: _____

Date submitted: _____

Dates of week in consideration: _____

Dates of additional hours requested: _____

Number of additional hours requested: _____

To be completed by Principal:
Date received: _____
Reason for request of additional hours: _____

Principal Approval Signature _____ Date _____

FOR CENTRAL OFFICE USE ONLY:
Approved By: _____ Date: _____