

GUEST Teacher Payroll Request Form

OREGON Conference

SCHOOL _____

On _____ FOR _____
Date(s) # of Hours (1 day = 7hrs, 1/2 day = 3.5hrs)

_____ was absent because of
Name of teacher

- 1. [] **Illness**
- 2. [] **Family illness**
- 3. [] **Personal leave** (two working days per year are granted)
- 4. [] **Death** in immediate family (up to five days Berevement)
- 5. [] **Professional Leave** (visitation day, professional growth activities _____
Name of Meeting)
- 6. [] **Conference Sponsored** (Evaulation, PLC, Etc) _____
Name of meeting
- 7. [] **Mentoring**
- 8. [] **School sponsored leave** (field trips, Academy Day, etc.) – **bill school**
- 9. [] **Outdoor School**
- 10. [] **Other** _____
Name of meeting

Full name & address of substitute teacher:

[] Teacher not present; volunteer
substitute in classroom – No payment

Principal/Head Teacher Signature

We must have the following information on NEW substitutes:

Required paperwork for new subs:

- Locally Funded New Hire Request
- I-9 Direct Deposit Form
- W-4 Application
- Employment Information Verification Form
- \$17.25hr (certificated) \$14.55hr
(Submit Certification to Fawn Fahrer)

Submit to Fawn Fahrer
Fax: 503-850-3451
Email:
fawn.fahrer@oc.npuc.org

Office of Education
Oregon Conference of
Seventh-day Adventists

