

**GILROY UNIFIED SCHOOL DISTRICT**Request for Substitute Teacher  
(for Release Time)

Teacher to be absent: \_\_\_\_\_

Date(s) of absence: \_\_\_\_\_

School Assignment: \_\_\_\_\_

Grade Level: \_\_\_\_\_ Reporting Time: \_\_\_\_\_

Check one:

\_\_\_\_\_ Full Day – 7 ½ hours

\_\_\_\_\_ Half Day – AM, 3 ¾ hours

Reporting Time: \_\_\_\_\_

\_\_\_\_\_ Half Day – PM, 3 ¾ hours

Reporting Time: \_\_\_\_\_

Program to be charged (budget code - must be completed)

Fund	Resource	Project Year	Object	Sub Object	Goal	Function	Cost Center	Site	Manager
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School Level Plan: Page \_\_\_\_\_ Section: \_\_\_\_\_

Purpose: \_\_\_\_\_

\_\_\_\_\_

Requested by: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Principal/Program Manager Approval

**To be completed by HR Department:**

Job # \_\_\_\_\_

Substitute Teacher Assigned: \_\_\_\_\_

Date: \_\_\_\_\_