ZPAF#	
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Broward County Public Schools SUB CENTRAL

POOL SUBSTITUTE TRAINING AGREEMENT

Pony to Sub Central Job Class 080800

School Name	Location Number
Contact Name	Phone Number
Pool Substitute Teacher Name	Social Security Number
Substitute Teacher Training Wor substitute teacher will have (1) fu	description requires that all pool substitutes attend the rkshop within the first year they are hired. The poo ull year from the approval date to attend training. If the ne year he/she cannot remain a pool substitute at your
training is not completed after of location.	ne year ne/sne cannot remain a poor substitute at your
location.	
location.	bligations contained in this agreement.
location.	bligations contained in this agreement.
location. I have read and understand, the o	bligations contained in this agreement.
I have read and understand, the o	bligations contained in this agreement. Principal/Director Signature Approval Date
I have read and understand, the o Pool Substitute Teacher Signature Hired Date	bligations contained in this agreement. Principal/Director Signature Approval Date
I have read and understand, the o Pool Substitute Teacher Signature Hired Date	bligations contained in this agreement. Principal/Director Signature Approval Date From initial approval date.) Training Exemptions and County Teacher (last satisfactory evaluation attached)
I have read and understand, the o Pool Substitute Teacher Signature Hired Date	Principal/Director Signature Approval Date From initial approval date.) Training Exemptions and County Teacher (last satisfactory evaluation attached) Workshop completed
I have read and understand, the o Pool Substitute Teacher Signature Hired Date	bligations contained in this agreement. Principal/Director Signature Approval Date From initial approval date.) Training Exemptions and County Teacher (last satisfactory evaluation attached)