



Forms are available on the [Department of Public Instruction website](#).

Instructions for the Applicant: Complete Section I below. Have the school district, CESA, EPP, or DPI-approved substitute teacher training provider complete the Section II and Section III of the form with signature.

Instructions for School District: Complete Section II and Section III below, sign, and return to applicant.

SECTION I APPLICANT INFORMATION

Legal Name *Last, First, Middle*

Other / Previous Names

SECTION II SUBSTITUTE TEACHER TRAINING VERIFICATION

The applicant listed above in Section I has completed all the following requirements, listed below, for Substitute Teacher Training:

- Basic school district and school policies and procedures.
- Age-appropriate teaching strategies.
- Discipline, conflict resolution, and classroom management techniques.
- Health and safety issues, including handling medical emergencies.
- Techniques for starting a class.
- The culture of schools and the teaching profession.
- Working with lesson plans.
- Working with children with disabilities, including confidentiality issues.

Completion Date of Substitute Teacher Training

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SECTION III SUBSTITUTE TEACHER SCHOOL DISTRICT INFORMATION

School District

Print Name of District Administrator or Authorized Designee
First and Last Name

Email Address of District Administrator or Authorized Designee

SIGNATURE

I, THE DISTRICT ADMINISTRATOR or Authorized Designee, ATTEST that the educator listed above has completed all requirements of the substitute teacher training. The employing School District can only attest to training provided by the employing school district. If requested, the school district will provide DPI an agenda, itinerary or syllabus of the school district's substitute teacher training program.

Signature of District Administrator or Authorized Designee

Date Signed
Mo/Day/Yr
