

# Teacher Substitute Registry Profile Form

## Dryden Central School

**School District Office Use Only**

Authorized by: \_\_\_\_\_

Date BOE Approved: \_\_\_\_\_

Approved Grade Level:

|  |                 |           |                   |
|--|-----------------|-----------|-------------------|
|  | Elem            | Middle    | High              |
|  | PK-5<br>CS, DES | FS,<br>MS | 6-8<br>9-12<br>HS |

This information will be used solely for the purposes of the substitute calling service provided by TST BOCES.

Other: \_\_\_\_\_

Verify and initial BOE approved sub area(s) before forwarding form to TST.

\*Return completed form to:

**Dryden District Office**

**Personal Information:**

|                       |                   |                 |                 |
|-----------------------|-------------------|-----------------|-----------------|
| Last Name:            | First Name:       | MI:             | Payroll Emp ID: |
| Home Street Address:  |                   | PO Box:         |                 |
| City:                 | State:            | Zip:            |                 |
| Primary Phone: (    ) | Alt Phone: (    ) | E-Mail Address: |                 |

\*Do you have a college degree?     Yes     No

If yes, Type of Degree and Subject area: \_\_\_\_\_

\*Do you hold a valid teaching certificate?     Yes     No    If yes, which State(s): \_\_\_\_\_  
 in which certification areas? \_\_\_\_\_

\*Indicate the grade level you do **NOT** want to sub in:  
 Pre-K, Kindergarten, Elementary grades: \_\_\_\_\_, Middle School, High School

\*Indicate any subject areas you do **NOT** want to sub in:  
 Art, Business, ELA, ESL, Family&Consumer Science/Home Ec., Foreign Language, Health, Industrial Arts/Tech. Ed., Library, Math, Music, PE, Reading, Science, Social Studies, Special Ed, Speech, Technology Ed., Visually/Hearing Impaired,  
 Other: \_\_\_\_\_

\*Circle the days you are **NOT** able to work:(this can be modified after you have an account)  
 Monday    Tuesday    Wednesday    Thursday    Friday

\*School Districts you are currently approved to sub in (circle all that apply at this time)  
 Candor    Dryden    Groton    Ithaca    Lansing    Newfield    South Seneca    Trumansburg    TST BOCES

School Districts , return the completed form to:  
 Substitute Coordinator  
 TST BOCES, 555 Warren Rd. Ithaca NY 14850  
 607 257-1551 x1047

TST Substitute Coordinator use only:  
  
 Assigned Substitute ID# \_\_\_\_\_