Caller Sub Replacement Form Agreement

Caller needing sub (print): ________________________________

Caller substitute (print): ________________________________

Date and Time for Sub to work: ____________________________

You are responsible for making sure your shift is covered. Therefore, it is to your benefit to verify that your substitute called to confirm the shift change. **A substitute cannot use an absence to cover the shift.**

If you are subbing for someone else, you are now accepting responsibility for this shift as a scheduled shift for yourself. **If you are unable to attend this shift for any reason, you must find a replacement sub; this is your only option.** Otherwise, you will receive attendance points.

Caller needing sub signature: ______________________________

Caller substitute signature: ________________________________

Manager signature: ____________________________ Date Received: __________

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