

NJDOE Substitute Service Limit Extension Request Form

Substitute service time limits and extensions may be found on the substitute website.

Local Educational Agency and Position Information

Local Educational Agency (LEA):	
Title of Vacancy Filled by Substitute:	
Date the Position Became Vacant (mm/dd/yy):	
Certification(s) Required to Fill Vacant Position:	
Placed Substitute Information	
Name of Placed Substitute:	
Tracking Number:	
Substitute Start Date in Vacant Position (mm/dd/yy):	
Anticipated Last Date of Extended Service (mm/dd/yy):	
Certification(s) or Credential Held by Placed Substitute:	
Efforts to Fill Vacancy	

Describe efforts to hire appropriately certified teacher during the first 20/60 instructional days of vacancy. Include reasons why the LEA was unable to hire an appropriately certified teacher.



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Substitute Supervision

Describe how the substitute has been and will continue to be supervised and periodically monitored.

Statement of Certification		
Print and sign the following: I certify that all statements and information provided herein	n are true and accurate to the best of my knowledge.	
Signature:	Date (mm/dd/yy) :	
Print Name:		
Title:		
County Office Verification Only		
For County Office use only.		
Application received by:		

Date (mm/dd/yy):

Signature:

The signature confirms that (select one):

Information provided is complete and verified.

Information provided is incomplete and cannot be verified.

Additional explanation: