

Sherman Independent School District
Human Resources
Preferred Substitute List

Employee Name _____

Campus/Department _____

I am requesting that the following substitutes be entered as my “preferred list” in assigning substitutes to employment. The campus principal must approve each name submitted.

Substitute #1 _____

Approved

Not Approved

Substitute #2 _____

Approved

Not Approved

Substitute #3 _____

Approved

Not Approved

I understand that my “preferred list” will remain until changed by one of the following:

1. Written request of the employee
2. Written request of the building principal
3. Written request of the substitute
4. Substitute terminates employment with the district

Employee signature

Date

Principal signature

Date

