



Haywood County Schools

Substitute Statement

I, _____, understand that as a substitute for the Haywood County Public School system, I shall abide by the policies set forth by the Haywood County Board of Education. I understand that Haywood County Public Schools reserves the right to remove my name from the active substitute list at any time for reasons including, denials of requests for substitute services, complaints from principals, lack of need, or any other appropriate reason. I understand that in accordance with North Carolina General Statute 96-8(10), No **substitute teacher or other substitute personnel shall be considered unemployed** for days or weeks when not called to work.

Signature _____

Social Security Number _____

Date _____