

REQUEST FOR EXTRA HELP FOR VACANCY

Submit only one request/position per form. All requests should be made a **minimum** of two business days **before** the date the extra help is being requested. ***** (NOTE: NOT ALL FORMS ARE APPROVED – DO NOT CONFIRM A SUBSTITUTE UNTIL THE FORM HAS BEEN APPROVED.)** A new form must be submitted for approval every 30 days for on-going requests (please submit ongoing requests by the 20th of the month for the next month) and email as indicated below.

Email **ALL General Education and Special Ed Requests** directly to subdesk@buffaloschools.org

School # and/or Name of School:		
Today's Date:		
Special Ed or General Ed:	Check one	<input type="checkbox"/> Special Education <input type="checkbox"/> General Education
Reason for request: You must check one – <u>Substitute requests are categorized as follows:</u> Inactive: Employee is no longer active in AESOP due to certification lapse, leave without pay, etc. – You must provide name of inactive staff member Vacant: The position is budgeted, but not yet filled Extra Help: An additional person is needed in the school to provide a specific support	<input type="checkbox"/> Administrator is inactive in AESOP <input type="checkbox"/> Teacher is inactive in AESOP <input type="checkbox"/> Teacher Aide/Asst. is inactive in AESOP Name: _____ <input type="checkbox"/> Vacant Administrative position <input type="checkbox"/> Vacant Teacher position <input type="checkbox"/> Vacant Teacher Aide/Asst. position <input type="checkbox"/> Extra Help Administrator <input type="checkbox"/> Extra Help Teacher <input type="checkbox"/> Extra Help Teacher Aide/Asst. <input type="checkbox"/> Extra Help SIG/PSIG/CSG/RECEIVERSHIP <input type="checkbox"/> 1003b	
Extra help for Special Ed – If an additional unbudgeted person is needed, in addition to checking a box in the section above, you must check a box in this section and explain the reason.	<input type="checkbox"/> Medical <input type="checkbox"/> Behavioral <input type="checkbox"/> Legal <input type="checkbox"/> Other - You must specify reason for request:	
Title for which a substitute is being requested: (Ex. Math, 15:1, teacher aide, etc.)	Title/Subject:	
	Grade:	
Complete the following information for all requests.		
Date/Dates needed – Enter Date or Date Range (If for the month specify date range (ex. 10/1 – 10/31) Requests can only be entered one month at a time.		
If you want the AESOP system to fill the opening please check AESOP to Fill or if you have a substitute that has already been confirmed enter their name: *****DO NOT LEAVE BLANK.*****	<input type="checkbox"/>	AESOP to fill Sub Name: