

# Teacher Substitute Registry Profile Form

## TST BOCES

**School District Office Use Only**

Authorized by: \_\_\_\_\_

Date BOE Approved: \_\_\_\_\_

Approved Grade Level:

|               |                       |     |
|---------------|-----------------------|-----|
|               |                       |     |
| Career & Tech | Exceptional Education | RAS |

Other: \_\_\_\_\_

Verify and initial BOE approved sub area(s) before forwarding form to TST.

This information will be used solely for the purposes of the substitute calling service provided by TST BOCES.

\*Return completed form to:

**Human Resources**

**Personal Information:**

|                       |                   |                 |
|-----------------------|-------------------|-----------------|
| Last Name:            | First Name:       | MI:             |
| Home Street Address:  |                   | PO Box:         |
| City:                 | State:            | Zip:            |
| Primary Phone: (    ) | Alt Phone: (    ) | E-Mail Address: |

\*Do you have a college degree?     Yes     No

If yes, Type of Degree and Subject area: \_\_\_\_\_

\*Do you hold a valid teaching certificate?     Yes     No    If yes, which State(s): \_\_\_\_\_  
 in which certification areas? \_\_\_\_\_

\*Indicate the grade level you do **NOT** want to sub in:  
 Elementary grades: \_\_\_\_\_, Middle School, High School

\*Indicate any subject areas you do **NOT** want to sub in:  
 \*\*Career/Tech - Animal Science, Auto Body, Auto Tech, Career Exploration, Certified Nurse Assistant, Computer Tech, Cosmetology, Criminal Justice, Culinary Arts, Digital Media, Early Childhood, Exercise Science, Food Services, Heavy Equipment, Outdoor Power, CTE Math, New Visions (Health & Medical Careers, Life Science, Engineering), CTE Science, Welding  
 \*\* Exceptional Education - Art, Hearing impaired, Math, Science, Visually impaired,

\*Circle the days you are **NOT** able to work:(this can be modified after you have an account)  
 Monday    Tuesday    Wednesday    Thursday    Friday

\*School Districts you are currently approved to sub in (circle all that apply at this time)  
 Candor    Dryden    Groton    Ithaca    Lansing    Newfield    South Seneca    Trumansburg    TST BOCES

School Districts , return the completed form to:  
 Substitute Coordinator  
 TST BOCES, 555 Warren Rd. Ithaca NY 14850  
 607 257-1551 x1059

TST Substitute Coordinator use only:  
  
 Assigned Substitute ID# \_\_\_\_\_