

SUBSTITUTE TEACHER SERVICE LIMIT EXTENSION

THIS CERTIFIES THAT _____
Name

XXX-XX- _____ tracking number _____
SSN Last Four Digits

Acting as a substitute teacher of _____

in the public school district of _____

in the county of _____

shall extend the substitute service limit for an additional _____ **days.**

THIS EXTENSION IS HERBY SUBMITTED TO THE EXECUTIVE COUNTY SUPERINTENDENT BY

School District Personal Signature and Title DATE

RESTRICTIONS: A substitute credential holder, CTE substitute credential holder and a holder of a certificate with an endorsement outside of the subject being taught may not, under any circumstances, serve more than 40 total days in the same classroom per year.