

## Substitute Request Form

Name: \_\_\_\_\_

Class: \_\_\_\_\_

Date(s) of Absence: \_\_\_\_\_

Name of Substitute: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Is this substitute on the approved substitute list? \_\_\_ Yes \_\_\_ No**

(If no, prior approval should be sought via email from the Department Chair.)

**Is your request for a Sub due to University Business? \_\_\_ Yes \_\_\_ No**

(Please review FACULTY ABSENCE AND SUBSTITUTE POLICY for definition of "University Business")

**For technique classes: Will your sub need a musician? \_\_\_ Yes \_\_\_ No**

(Please inform Music Director if you will be canceling or adding a musician for your sub)

**Will the sub be paid? \_\_\_ Yes \_\_\_ No**

**If yes, who is paying? \_\_\_\_\_**

**If no, what arrangements have been made? \_\_\_\_\_**

\_\_\_\_\_

**Please attach VOLUNTEER FORM with this request  
(<http://daf.csulb.edu/forms/bhr/staffpersonnel/volassgn.pdf>)**