West Orange Public Schools Human Resource Department 179 Eagle Rock Avenue West Orange, New Jersey 07052

Substitute Rer	newal Form		
Must be returned by May 17, 2	2019, to Kim Stech	er in HR	
Name:	Check if new address		
Street Address:			
City, State and Zip Code			
ome Phone: Check if new home phone			
Cell Phone:	Check if new cell phone		
Indicate phone number to be used for Absence Mana	agement (Aesop):	□ Home	□ Cell
Email Address:		_ Check if nev	v email
 Please indicate one of the following: I would like to remain on the active substitut I would like to be removed from the active sub New Jersey Certificates you currently hold: (Please in Substitute Credential Standard Certificate Subject	ostitute list for 2019 ndicate subject as r	-2020 school yea equested)	
Substitutes will be reappointed at the June 17, 20		-	
☐ Teacher ☐ Paraprofessi	ional	i ry I nurse)	

Please return this form to the Office of Human Resources no later than May 17, 2019. Forms may be returned via email to kstecher@westorangeschools.org, fax 973-736-6526, regular mail or interoffice mail.

You will be removed from the West Orange Public Schools active substitute list if you do not respond.

Signature

Date