

**ESCONDIDO UNION SCHOOL DISTRICT**  
**SUBSTITUTE ASSIGNMENT MANAGER**  
**EDUCATOR SUBSTITUTE FILE**

SSN# \_\_\_\_\_

NAME \_\_\_\_\_  
          Last                      First

ADDRESS \_\_\_\_\_  
                                  Street  
  
                                  \_\_\_\_\_  
                                  City                              State                      Zip

HOME PHONE \_\_\_\_\_

Are there any schools you will not go to? \_\_\_\_\_  
\_\_\_\_\_

I hereby authorize the District to release my telephone number to absentees.

\_\_\_\_\_  
Signature                                      Date

**CLASSIFICATION** (Which assignments can we call you for?)

- |                       |                           |
|-----------------------|---------------------------|
| ____ 205 Grades 4-5   | ____ 345 Science          |
| ____ 210 Grades 1 - 3 | ____ 349 Humanities       |
| ____ 211 Kindergarten | ____ 350 Soc Studies      |
| ____ 216 Grade 6      | ____ 355 Exploratory      |
| ____ 220 Grades 7/8   | ____ 356 Opportunity      |
| ____ 305 ALC          | ____ 405 Bilingual/ESL    |
| ____ 310 Art          | ____ 410 Music            |
| ____ 315 Computer Ed  | ____ 415 Title            |
| ____ 320 Home Ec      | ____ 505 Adaptive PE      |
| ____ 325 Indust Arts  | ____ 510 Deaf/Hard Hear.  |
| ____ 330 Lang Arts    | ____ 515 Spec Ed - NON    |
| ____ 335 Math         | ____ 520 Spec Ed - Severe |
| ____ 340 PE           | ____ 525 Pre-School       |

**Weekly Availability:** (Circle Days Available)

AM - M T W Th F

PM - M T W Th F