

Substitute Report

Department: _____

Account Number: _____

Substitute Rates	
Lecture	\$20.00 per hour
Lec/Lab	\$18.50 per hour
Lab	\$17.00 per hour
Exam	\$10.00 per hour

**See Policy A6.13.2 for extended absences past the 6th hour/day*

Sub ID	Sub Name	Sub Date	Class	Class Type	Clock Hrs	Rate	Amount Due	Sub for (faculty name)

 Supervisor/Chairperson Signature Date

 Divisional Dean Signature Date