

# Substitute Teacher Temporary Contract

Date: \_\_\_\_\_

Substitute Teacher Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

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

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

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

## Assignment Details

Position: \_\_\_\_\_

Grade/Subject: \_\_\_\_\_

Start Date: \_\_\_\_\_

End Date: \_\_\_\_\_

## Terms of Employment

The Substitute Teacher agrees to perform the duties and responsibilities assigned for the position during the dates indicated above. Compensation will be provided at the rate of \_\_\_\_\_ per day. This contract is temporary and will terminate automatically at the end of the stated period without further notice.

## Signatures

\_\_\_\_\_  
Substitute Teacher Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Administrator Signature

\_\_\_\_\_  
Date