



**NON-INSTRUCTIONAL SUBSTITUTE INFORMATION SHEET**

Please fill out and return to: Principal's Office  
Berlin Jr/Sr High School  
P. O. Box 259  
Berlin, NY 12022

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

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

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

\_\_\_\_\_ YES I wish to be on the active non-instructional substitute list for the 2011-2012 school year.

\_\_\_\_\_ NO I do not wish to be on the active non-instructional substitute list for the 2011-2012 school year.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

If you have circled YES to the above, please complete the remainder of the form by circling your response.

What school(s) do you wish to substitute in?

MS/HS (6-12)          Berlin (K-5)

What area(s) do you wish to substitute in?

Aide    Monitor          Typist          Teaching Assistant          Health Office Assistant

Additional information you think the school should know: