Teamwork for Excellence

PLANO
Independent School District

Plano Independent School District
Human Resources Division
Substitute Office

In accordance with the Texas Unemployment Act, this letter is your reasonable assurance of employment to work as a substitute or adult temporary worker for the Plano Independent School District during the 2011-2012 school year. We cannot guarantee, if or how often, you will be called to substitute.

Please indicate whether or not you will be available to work as a substitute or adult temporary worker for the Plano Independent School District on this form.

If you have any questions, please contact Marisol Sonoda at 469-752-8219.

Sincerely,

Tamira Griffin
Executive Director, Human Resources

☐ I will be available for substitute or adult temporary work for the Plano ISD for the 2011-2012 school year.

Printed Legal Name	Social Security Number
Signature	Date

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English Proficiency Requirement

Job Description:

All substitutes must be able to comprehend and communicate effectively in English in order to appropriately conduct classes and lead instruction as necessary.

Application/Acknowledgement:

I acknowledge that the ability to comprehend and communicate effectively in English is a legitimate expectation for a position as a substitute in the Plano Independent School District. This requirement is necessary in order to appropriately conduct classes and lead instruction. Failure to comply with this requirement may result in my immediate termination from substitute employment with the Plano Independent School District.

_____
Name Print

_____ _____
Signature Date

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PLANO
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Plano ISD
Substitute Handbook
2011-2012
Statement of Receipt

I understand that the purpose of the Plano Independent School District Substitute Handbook is to provide vital information that will help answer questions and pave the way for a successful year. The Substitute Handbook is an overview and I understand that nothing in the handbook is intended to supersede district policy and/or federal or state law. I further understand that I am not guaranteed employment or continued employment with the Plano ISD.

I understand that I am responsible for reading and complying with all Plano ISD policies, procedures, and guidelines contained in the 2011-2012 Substitute Handbook. Further, I understand that failure to do so may result in adverse employment action against me; up to, and including, termination and permanent removal from the Plano ISD Substitute System and may also impact future employment opportunities with the Plano ISD.

By signing this statement of receipt, I acknowledge that I have received the 2011-2012 Plano ISD Substitute Handbook and/or have been informed how to access it on-line at http://www.pisd.edu/employment/substitute.information/index.shtml. I understand that I may direct questions or comments to the Substitute Office at 469-752-8219.

I have read, understand, and accept the contents of this document.

_____
Signature

_____
Printed Legal Name

_____
Social Security Number (last 4 digits)

_____
Date