

ADNA SCHOOL DISTRICT
Classified Substitute Questionnaire
2019-2020 School Year

Name _____ Date of Birth _____
 First Middle Int. Last Mo/Day/Yr

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____

Thank you for being a classified substitute with the Adna School District. We are now building our substitute list for the 2019-2020 school year. If you are interested in substituting next year, please fill in the information above and return it to the **Adna School District Office, P.O. Box 118, Adna, Washington 98522-0118 or please call 748-0362 by August 27, 2018.** If we do not hear from you, your name will be removed from the sub list.

1. Please circle the days you will be available.

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

2. Please circle the hours you will be available.

MORNING AFTERNOON ALL DAY

3. Please indicate the areas and schools you would be interested in working in.

Areas:

**EA - Reg Ed., Resource, & Playground
Office
Library
Kitchen
Custodial**

Schools:

**Adna Elementary
Adna Middle/High**