**STEWARTVILLE PUBLIC SCHOOLS**

**SUBSTITUTE CLAIM FORM**

 **TOTAL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PREP HOURS USED TO SUBSTITUTE FOR OTHER TEACHERS FOR PAY:**

**DATE(S) HOUR/PERIOD TEACHER’S NAME AREA/PROGRAM** (FOR DISTRICT OFFICE USE ONLY)

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Signature of Substitute Date

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 Principal/Supervisor Payroll Period (District Office Use Only)