

CCS PINK

ITHACA CITY SCHOOL DISTRICT

BOARD OF EDUCATION BUSINESS OFFICE

400 Lake Street

Ithaca, New York 14850

CCS PINK

Substitute Teacher's Report of Service

budget code: __A 2110-140-39-COVID_____

The following is a true statement of my service in the Ithaca City School District during the week of _____

DATE	AM	PM	\$50 IN-PERSON PAY (please check for each day)	SCHOOL	ADMIN SIGNATURE	CLASSROOM COLLABORATION SUBSTITUTE (note grade or class)

NOTE TO SUBSTITUTE:

This report is due at the ICSD Business Office on Friday of pay week. You will receive your payment on the following payroll provided this sheet has been received on time.

(Employee Name – printed)

(ICSD ID#)

(Employee Signature)