



THE SCHOOL DISTRICT OF ESCAMBIA COUNTY

**FORM TO REQUEST SCHOOL BOARD APPROVAL
FOR OUT-OF- FIELD TEACHER(S)**

MEMORANDUM

TO: Kelly Krostag, Assistant Superintendent of Human Resource Services
Carrie Hollon, Coordinator of Educator Certification

FROM: _____
Principal, _____

DATE: _____

SUBJECT: Out-of-Field Teachers

Please request School Board approval for the following teachers to teach out-of-field this school year:

Name of Teacher _____

Out-of-Field Assignment _____ # of Classes per Day _____

Rationale: _____

Name of Teacher _____

Out-of-Field Assignment _____ # of Classes per Day _____

Rationale: _____

Name of Teacher _____

Out-of-Field Assignment _____ # of Classes per Day _____

Rationale: _____

Affirmative action/equal opportunity employer