



# GRAYSON COLLEGE

## Request for Substitute Teaching Pay

PRINT NAME: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ SS# \_\_\_\_\_

DIVISION: \_\_\_\_\_ SEMESTER/YEAR: \_\_\_\_\_

**LECTURE:**

DATE	FROM	TO	# OF HRS.	AMOUNT TO PAY	SUBSTITUED FOR

**LAB:**

DATE	FROM	TO	# OF HRS.	AMOUNT TO PAY	SUBSTITUED FOR

\_\_\_\_\_  
*Employee* \_\_\_\_\_ *Date* \_\_\_\_\_ Total Hours \_\_\_\_\_

\_\_\_\_\_  
*Department Head* \_\_\_\_\_ *Date* \_\_\_\_\_ Account Number \_\_\_\_\_

\_\_\_\_\_  
*Executive Administrator* \_\_\_\_\_ *Date* \_\_\_\_\_ Hourly Pay Rate \_\_\_\_\_

\_\_\_\_\_  
*Vice President for Business Services* \_\_\_\_\_ *Date* \_\_\_\_\_

### FOR BUSINESS OFFICE ONLY

Account Number	Total Hours	Rate/Hr	Amount Paid
_____	_____	_____	_____

\$16.25 per lecture hour; \$11.50 per lab hour (some CTE programs may vary)