

**Substitute Teacher Reimbursement
 School Improvement CoSer 547.310
 Model School CoSer 563.110.001
 Health & Safety CoSer 636.310**

District _____ **Date** _____

Please Note:

- Maximum reimbursement \$115.00/day.
- Events must be BOCES events offered through one of the CoSers listed above.
- Current School Improvement Plan must be on file with OCM BOCES.
- **Column #5, School Improvement Activity, must indicate BOCES involvement – Actual title of event and date are essential. BOCES staff member, department, and/or location are also helpful.**
- A few programs have grant funding which covers substitutes. Districts are reimbursed through those grants rather than through the School Improvement CoSer.
- Adjustment to Services Contract to be used if CoSer monies are exhausted. It needs be signed by Superintendent or Business Official.
- Questions? Call or email:
 - Kris Kratz – 607-758-1127 – kkratz@ocmboces.org
 - Doreen Bergman – 315-431-8492 – dbergman@ocmboces.org

Teacher's Name (not substitute's name)	# of days or hours	Rate	Total	School Improvement Activity & Date	District Plan – Cite specific goal or objective

Submitted By _____

Total _____

Phone _____ e-mail _____

Adjustment to Services Contract OCM Component School Districts

Return to: Onondaga-Cortland-Madison BOCES
P.O. Box 4754
Syracuse, NY 13221
Attn: Andrew DiBlasi
Assistant Superintendent -Administration

For: _____
School District

Date: _____

Initiated by: _____

Description of adjustment to existing service

Service Code: 547.315 Amount: _____

Sub Reimbursements as attached
5% Administrative Fee

I certify that the services listed above have been requested by my district and that the cost of services have been budgeted and authorized by the Board of Education and I am authorized to sign this contact.

School Superintendent or Designee

Date

OCM BOCES District Superintendent or Designee

Date

If you have any questions, please call the OCM BOCES program administrator responsible for the service being adjusted or the Assistant Superintendent for Administration.

To be completed by OCM BOCES			
<u>Service #</u>	<u>Current Contract Amount</u>	<u>Adjustments</u>	<u>Revised Contract Amount</u>