

SUBSTITUTE REGISTERED NURSE - SPECIAL EDUCATION

PERSONAL INFORMATION

NAME: _____ SOC SEC NO.: _____
 STREET: _____ CITY/STATE: _____ ZIP _____
 TELEPHONE: (H) _____ (C) _____ CURRENT DATE: _____
 E-MAIL ADDRESS: _____
 CURRENT MEMBER OF NYS TEACHERS' RETIREMENT SYSTEM? YES [] NO []
 IF YES, FURNISH RETIREMENT NUMBER: _____ TIER _____
 (6 DIGITS)

ACADEMIC BACKGROUND

Degree(s): _____ Date Received: _____
 Major Course of Study: _____
 Where Degree(s) Received: _____

CERTIFICATION *

Exact Title of New York State Nursing License: _____
 (Those possessing a nursing license MUST submit a copy with this application.)

EXPERIENCE

_____	_____	_____
(Employer)	Location	(Inclusive Dates of Employment)
_____	_____	_____
(Employer)	Location	(Inclusive Dates of Employment)

PROFESSIONAL REFERENCES

_____	_____	_____	_____
Name	Title	Address	Phone
_____	_____	_____	_____
Name	Title	Address	Phone

COMMENTS/PREFERENCES/RESTRICTIONS [] Monday [] Tuesday [] Wednesday [] Thursday [] Friday
 _____ (Please continue on back of this form, if necessary.)

CHECK AREA(S) PREFERRED:

- () East (Akron, Alden, Clarence)
- () North (Kenmore, Amherst, Tonawanda, Williamsville, Sweet Home, Grand Island)
- () South (Hamburg, Frontier, Lackawanna, West Seneca)
- () Central (Cheektowaga, Cleve-Hill, Maryvale, Sloan, Lancaster, Depew)

Send completed application, a copy of your RN License and a signed copy of 'Information for Substitute Registered Nurses' to:
 Human Resources Services
 Erie 1 BOCES
 355 Harlem Road
 West Seneca, NY 14224-1892

PLEASE READ AND SIGN REVERSE SIDE OF THIS APPLICATION

**ERIE 1 BOCES
SPECIAL EDUCATION DIVISION
INFORMATION FOR REGISTERED NURSES'**

We welcome the services of individuals who are willing to accept on-call assignments as substitutes for us when our regular registered nurses' are absent.

To provide substitute registered nursing services for us, you must be on our approved list of substitutes. Completing the "Substitute Registered Nurses' Application Form" is the first step for approval; final approval and notification is given by Human Resources Services. A copy of your RN License must be submitted with your application. Attendance at an orientation session will also be required.

We operate special education classes in several of the component districts of Erie 1 BOCES. These classes serve students between 5 and 21 years of age. The major disabilities served are intellectually disabled, learning disabled, emotionally disturbed or speech impaired.

BRIEF SUMMARY OF "HOW THE SYSTEM WORKS": BOCES Registered Nurses have a certain number of days each year that they are allowed to take for reasons of illness or personal business. When they anticipate an absence they call to notify us of the pending absence; they can call either during working hours, or during non-working hours. We try to obtain substitutes as soon as we know of a need; therefore, you may be called during working hours, after 6:00 a.m. or possibly before 11:00 p.m.

After a substitute registered nurse completes an assignment he/she is responsible for filling out a "Substitute Teacher/Teacher Aide Payroll Information Form" that is available in the classrooms, and submitting the form to the office for processing. When the form is received, it is verified by a clerk, signed by the appropriate person, and forwarded to the Payroll Department for processing. Be sure to furnish your NYS Employee's Retirement System (ERS) Number on the application form. If you are not a member of the retirement system, or have not been for at least five years, you will need to sign a retirement election form at the Human Resources Service Office.

Information Items:

1. Pay is \$20.50 hour.
2. Payment for services generally takes four weeks after the form verifying services has been received in the office. This should be understood before agreeing to serve as a substitute.
3. All substitutes are notified by the Absence Management automated service.
4. Substitutes must sign the attendance register in the classes where they substitute.
5. Registered Nurses' appreciate having a note left by the substitute, describing significant events that happened during the registered nurses' absence.
6. Working hours for substitute registered nurses' are the same as for other registered nurses' in the buildings where special classes are housed. Substitutes should arrive and leave at the same time as other registered nurses'.
7. Substitutes may be observed for performance skills by the supervisors.

I have read and understand the contents of this Substitute Registered Nurses' form.

(Print or type name)

(Signature) (Date)

Please return the signed Substitute Registered Nurses' Form and a copy of your RN License to:

Human Resources Services
Erie 1 BOCES
355 Harlem Rd.
West Seneca, NY 14224

Human Resources: 821-7006; Exceptional Education 821-7096

ATTENTION -- BEFORE A PAYCHECK CAN BE ISSUED, THE FOLLOWING FORMS MUST BE FILED WITH THE HUMAN RESOURCES SERVICES OFFICE:

W-4 Federal Withholding Form
NYS Employees Retirement System Election Form

IT-2104 State Withholding Form
I-9 Federal Employment Eligibility Verification
(must be completed in person)

SUBSPED

YOUR COPY

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(Signature)

(Date)

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