



<b>FOR OFFICE USE ONLY!</b>	
Rec' Date: _____	Rec' By: _____
Employee's ID #: _____	
EM/PHONE Conf to Sub _____	
<i>with new URL &amp; Username</i>	

GO \_\_\_ AM \_\_\_ ST \_\_\_ PSW \_\_\_ AF \_\_\_ STR \_\_\_

# Request to Be Reactivated

## 2023 – 2024 School Year

The Southwest Ohio Council of Governments (SWOCOG) intends to maintain your employment in a similar position for the 2023-2024 School Year.

**Fees**

Request to Be Reactivated fees are waived for the 2023-2024 school year. However, you are responsible for the cost of maintaining an active teaching or substitute license through the Ohio Department of Education.

**Fingerprinting**

You must have your FBI report completed unless you have had it completed within the past 365 days of returning to the SWOCOG. You must turn in a copy of your current FBI report with your Request to Be Reactivated form.

**Certification**

If your teaching or substitute license through the Ohio Department of Education has expired, you must send SWOCOG a copy of the renewed license with your Request to Be Reactivated form.

**Unemployment**

All substitutes processed through the SWOCOG are reasonably assured of continued employment until otherwise notified. Unemployment benefits based on service in an educational institution typically will not be paid to any individual for any week of unemployment between academic years/terms, or established holidays/breaks. Generally, substitutes will not be eligible for unemployment benefits.

**Contact Information** (Please complete even if there are no changes.)

Current Address: \_\_\_\_\_

Current Phone Number: \_\_\_\_\_

Current Email Address: \_\_\_\_\_

Please sign and return the form, including a copy of your FBI report and a recently renewed ODE credentials to:

Warren County ESC  
 ATTN: COG SUBS Admin  
 1879 Deerfield Road  
 Lebanon, OH 45036

or email to: [cogsubs@warrencountyesc.com](mailto:cogsubs@warrencountyesc.com)

Signing below indicates your intention to return as a Substitute with the Southwest Ohio Council of Governments.

\_\_\_\_\_  
 Legal Last Name (Printed)

\_\_\_\_\_  
 Legal First Name (Printed)

\*Signature: \_\_\_\_\_

\*Date: \_\_\_\_\_

<https://www.cogsubs.com>

Butler County Contact (513) 887-5508 | Warren County Contact (513) 695-2900 option 4