SUBSTITUTE TIER RATE FORM
SCHOOL YEAR 2025-2026

Date _____   School District _____

Remote Learning Environment? ☐ Yes ☐ No

21st Consecutive Day on Assignment
Madison Only

Teacher Name:	
Teaching Subject:	
Grade Level:	
Assignment Begin Date:	
Building Assigned:	

20th Day Worked on:	
21st Day Tier Rate Begin Date:	
Tiered Rate on 21st Day:	$

Sub ID No	888
Substitute Name:	
Starting Tier Rate	$
Qualfying License Type?	☐ Yes ☐ No
Expiration Date	

On the 61st Consecutive Day:
Will the sub be paid by your district?   ☐ Yes ☐ No

If yes, what is the effective day worked the district will begin paying the sub _____ .

If no, please complete the portion below, sign, and return.

61st Consecutive Day on Assignment

60th Day Worked on:	
61st Day Tier Rate Begin Date:	
Tiered Rate on 61st Day:	190/day - COG will Pay

Please complete this form PRIOR to any anticipated rate increase for any substitute that is to be paid by the Southwest Ohio Council of Governments. Tiered rates for each district vary, so please complete the sections that apply only to your district.

Tiered rate pay applies to substitutes who work in the same position or assignment (meaning the sub is subbing for the same teacher, in the same school building) for a number of consecutive days without being absent, UNLESS specified and approved by the Treasurer.

61st consecutive day in an assignment must have appropriate licensure or COG Board approal depending on license type.

Please email this completed and signed form to **Julie Prack** at **Julie.Prack@warrencountyesc.com**

Use the notes section below to indicate if there are any exceptions and to let us know when a substitute has completed the long-term assignment.

NOTES:

_____
_____
_____
_____
_____

Building Principal's Signature _____   Treasurer's Signature _____

* Building Principal and Treasurer have verified that the substitute is properly licensed in subject area beginning on the 61st day.

This form must be signed by the Treasurer and returned before we can pay substitutes any tiered rate pay.

COG Board Approval Over 60 Days _____   _____