



# Sangamon-Menard Regional Office of Education

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## SUBSTITUTE TEACHER CHECKLIST

NAME: \_\_\_\_\_

### DATE/INITIALS

- \_\_\_\_\_  Proof of identification (driver’s license, state i.d.)
- \_\_\_\_\_  Proof of physical (within 90 days)
- \_\_\_\_\_  Schedule appointment for Fingerprint at [www.roe51.org](http://www.roe51.org). **On the right side of page under “Services,” click on “Schedule Background Check.”**
- \_\_\_\_\_  Fingerprint Background Check Fee \$50 (non-refundable):  
Paid by: Check # \_\_\_\_\_/CC Auth \_\_\_\_\_/Cash

### Professional Educator License or Substitute License

- I hold an IL Professional Educator License registered through \_\_\_\_\_**  
(If license is not registered pay online through ELIS at [www.isbe.net](http://www.isbe.net));
- I hold an IL Substitute License registered through \_\_\_\_\_;**
- I hold an IL Paraprofessional/Aide License and have a Bachelor’s Degree;**
- I Do Not Currently Hold an IL Educator License:***  
I understand that I will need to complete the following:  
 Complete on-line Substitute application (\$50/nonrefundable)  
 Pay on-line registration fee (\$50/nonrefundable)
- \_\_\_\_\_  Official transcripts in a sealed envelope; or Official transcripts sent electronically *from University directly to* [kbrewer@roe51.org](mailto:kbrewer@roe51.org).
- \_\_\_\_\_  Signed authorization of release form
- \_\_\_\_\_  Signed authorization for placement in sub database

I understand the requirements for obtaining a substitute teaching license/authorization as set forth in 105 ILCS 5/10-21-9.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of ROE

\_\_\_\_\_  
Date

\_\_\_\_\_  
Sub Authorization Completed (Initials)

\_\_\_\_\_  
Date Mailed