



Emergency Substitute Placement

Center Name: _____

Contact Person: _____ Phone Number: _____

Position Request:

Director Teacher Teacher's Aide VPK Teacher Cook

Type of Service:

Substitute/ Permanent Emergency/ Substitute

Location:

Infant room One year old room Two year old room Three year old room
 Four/ Five year old room After-school room Kitchen Office

Dates needed: _____ Work schedule: _____

***Timesheets must be completed and signed by both the director and the employee. The timesheet is due at the end of each week the substitute works, i.e. close of business on Friday. Fax: 727-578-0995**

Customer Agreement

Emergency Substitute Placement- Submission of this form enters _____(Client) and The Education Team Inc. in an agreement under the following conditions. The substitute rate is a flat rate of \$13.00 per hour plus, a deposit of \$250. Worker's Compensation Insurance and Payroll Taxes are included in this rate.

Invoices- Centers will be invoiced weekly for all hours worked by The Education Team Inc. employee during the previous week. Invoices are due upon receipt. Any invoice not paid after 3 days of the date of the invoice are subject to a \$50 dollar late fee and shall bear interest of one and one half percent (1.5%) per month (or in case of conflict with usury laws, the highest lawful amount). You further agree to pay reasonable cost of collections including attorney's fees and court costs. You and your company agree to be liable for all debts arising from the relationship with The Education Team, Inc.

If you, your successor or assigns, either directly or indirectly hire, utilize, consult with or other wise take advantage of the services of any employee placed at your company by The Education Team Inc., you agree to be bound by The Education Team Inc. Buyout Policy. This stipulation shall also apply should you cause a third party to hire, utilize, consult with, or other wise take advantage of the services of any employee placed at your school by The Education Team.

The Education Team, Inc. thanks you for your business and encourages you to contact us with any questions or concerns. We look forward to serving you.

Sincerely,
The Education Team
727-578-0999

Print name (owner/ director) Sign name (owner/ director) Date

This document must be signed by the owner/ director and faxed to 727-578-0995, prior to placement of any employee.