



If an approved concurrent enrollment high school teacher goes on planned or unplanned short-term medical or other leave, the high school should work with PTCC to approve the long-term sub and plan for the concurrent enrollment class during the leave.

Concurrent Teacher Information

Teacher Name: _____ Approximate Dates of Leave: _____

Course(s) Teaching During Leave: _____

Detailed Plan for Coverage

Substitute Teacher Name: _____

Teacher Phone Number: _____ Teacher Email: _____

Describe the substitute teacher’s experience, credentials and the communication plan for PTCC staff, faculty mentor and high school administration (attach additional information as needed).

Has this plan to cover the extended leave been communicate with the PTCC Faculty Mentor? Yes No

Required Documentation

Substitute Teacher Resume

Substitute Teacher Transcripts

PTCC Credential Review Form

High School Administrator Signature _____ Date _____

High School Teacher Signature _____ Date _____

Please note: This form must be submitted prior to the leave taking place. Once the complete form has been received, PTCC will respond with approval, denial, or request more information.

Submit information to Kierstan Peck, Director of Student Success at kierstan.peck@pine.edu or 900 Fourth Street SE, Pine City, MN 55063.

FOR OFFICE USE ONLY:

Based on the information above, indicate whether the plan for extended leave is:

Fully approved Denied Need more information: _____

Academic Dean Signature _____ Date _____