



# Rocky Hill Public Schools Personnel Recommendation & Internal Transfer Form

To: Superintendent (Certified Employees)  
Assistant Superintendent Finance (Non-certified Employees)

From: \_\_\_\_\_

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

RE: PERSONNEL RECOMMENDATION

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I recommend the candidate below for a position in the Rocky Hill Public Schools:

Candidate Name: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Phone \_\_\_\_\_

Position information *(check all that apply)*:

New Position \_\_\_\_\_ Certified \_\_\_\_\_ Full-Time \_\_\_\_\_ FTE \_\_\_\_\_

Internal Transfer \_\_\_\_\_ Non-Certified \_\_\_\_\_ Part-Time \_\_\_\_\_ Rate of Pay \$ \_\_\_\_\_

Replacement \_\_\_\_\_ Substitute \_\_\_\_\_ Seasonal \_\_\_\_\_ Hours per Day \_\_\_\_\_

Former Employee: \_\_\_\_\_ Days per Week \_\_\_\_\_

Schedule: \_\_\_\_\_  
(example 8:00am – 12:30 M-F)

Assignment Title: \_\_\_\_\_ Assignment Location: \_\_\_\_\_

Previous Assignment: \_\_\_\_\_ Previous Location: \_\_\_\_\_  
(If applicable) (If applicable)

Anticipated Start Date: \_\_\_\_\_ Anticipated End Date: \_\_\_\_\_

**(pending receipt of all required forms)**

Reference Check Forms Attached (3): \_\_\_\_\_

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Recommended by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature of person recommending the candidate)

Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
(Superintendent/Assistant Superintendent Finance)

Received by HR: \_\_\_\_\_ Date: \_\_\_\_\_