

# EMPLOYMENT RECOMMENDATION FORM



Please complete form and return to Superintendent's Office with the following attached:

- Resume
- Application
- Copy of License
- Copy of Transcript

## PLEASE PRINT

<b>Last Name:</b>	
<b>First Name:</b>	
<b>SSN:</b>	
<b>Date of Birth:</b>	
<b>Race:</b>	
<b>Gender (Circle one)</b>	
<b>School/Location:</b>	
<b>Years of Experience:</b>	
<b>New Position: (Circle one)</b>	
<b>If no, who are they replacing?</b>	
<b>Start Date:</b>	
<b>CERTIFIED EMPLOYEES</b>	
<b>Certification (Circle one)</b>	
<b>Position:</b>	
<b>Subject:</b>	
<b>Grade:</b>	
<b>NON-CERTIFIED EMPLOYEES</b> (Including tutors, para-professionals, long-term subs, etc...)	
<b>4-year Undergraduate Degree (Circle one)</b>	
<b>College Hours (48 hours minimum)</b>	
<b>Funding Source (Circle one):</b> District                      SPED                      TITLE                      Other:	
<b>APPROVED:</b>	
_____	_____
(Supervisor/Principal)	Date:
_____	_____
(Fund Director/Coordinator)	Date:
_____	_____
(Superintendent)	Date: