

PERSONNEL

03.21 AP.25

- CLASSIFIED PERSONNEL -

Recommendation for ~~Classified~~ Employment**Classified Candidate**

CANDIDATE NAME					GENDER	
Phone #				Cell #		
Is candidate currently employed by the District?				<input type="checkbox"/> YES	<input type="checkbox"/> No	
Educational Background	<input type="checkbox"/> GED	<input type="checkbox"/> HS Diploma	<input type="checkbox"/> Vocational	<input type="checkbox"/> College Grad		
Position to be Filled						
Person Replacing				OR New Position	<input type="checkbox"/> YES	<input type="checkbox"/> No
Total Years' Experience Granted			Starting Date			
This Person to be	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Temporary			
Rate of Pay Per Hour			Hours Per Day			Days per Year

Paraprofessional Position

CANDIDATE NAME					GENDER	
Phone #				Cell #		
Position to be Filled					Level	
Person Replacing				OR New Position	<input type="checkbox"/> YES	<input type="checkbox"/> No
Total Years' Experience Granted			Starting Date			

Administrator's Signature: _____ DATE _____

Superintendent's Signature: _____ DATE _____

YEARLY COMPENSATION BY SUPERINTENDENT \$ _____

Recommendation for Employment**Paraprofessional Position**

<u>CANDIDATE NAME</u>				<u>GENDER</u>	
<u>Phone #</u>		<u>Cell #</u>			
<u>Email Address</u>					
<u>Position to be Filled</u>				<u>Level</u>	
<u>Person Replacing</u>			<u>OR New Position</u>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<u>Starting Date</u>					

Administrator's Signature: _____ DATE _____

Superintendent's Signature: _____ DATE _____

YEARLY COMPENSATION BY SUPERINTENDENT \$ _____

RELATED PROCEDURE:

03.11 AP.25