PERSONNEL 03.21 AP.2

- CLASSIFIED PERSONNEL -

Recommendation for Coach/Sponsor

Candidate Name						Gender		
Phone #			Cell #	<u>ŧ</u>				
Position to be Filled								
Person Replacing				OR New Position				
Total Years' Experier		Star	ting Date					
This Person to be			□ Unpaid					
Administrator's Signature:				DATE				
Superintendent's Signature:				DATE				
Yearly Compensation By Superintendent \$								