

Personnel Recommendation Form

School/Location \_\_\_\_\_

Candidate's legal name (Last, First, Middle) \_\_\_\_\_

Candidate's phone number \_\_\_\_\_

Tennessee Teaching License Number \_\_\_\_\_

Teaching Assistant Highly Qualified Documentation \_\_\_\_\_

Is recommended to fill the  professional  classified position of \_\_\_\_\_  
This position was vacated by \_\_\_\_\_ on \_\_\_\_\_ Date Who left due to:

Resignation  Retirement  Long Term Leave  Transferred to \_\_\_\_\_ school/department  Other \_\_\_\_\_

This Action is:  New Hire Permanent  New Hire Interim  Part-time  Temporary position  Transfer

Principal/Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

CENTRAL OFFICE USE ONLY

Request is:  Approved  Rejected effective start date: \_\_\_\_\_

Notes: \_\_\_\_\_

Funding Source: General \_\_\_ Federal \_\_\_

Budget Pay Code \_\_\_\_\_

Pay per Time Sheet \_\_\_\_\_

Certified Position Information:

Degree \_\_\_\_\_ Years \_\_\_\_\_ # Days per Year \_\_\_\_\_

Classified Position Information:

Category \_\_\_ Years \_\_\_ Hourly rate \_\_\_ # Hours per Day \_\_\_ # Days per Year \_\_\_

Program Supervisor \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

HR Department/Date \_\_\_\_\_

Chief Financial Officer/Date \_\_\_\_\_

Director of Schools/Date \_\_\_\_\_

Distributions/Data Entry:

- Siesta  Principal/Supervisor  Edison
 Payroll  Board  Delta Dental
 FP  ReadySub

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