

Little Egg Harbor School District Employment Recommendation Form

I am recommending the following applicant for employment/stipend position:

Certified Staff

Name of Employee:			
Position:			
School Year:		Step:	
Salary/Stipend:		Start Date:	
Full or Part Time:		Building:	
If Part Time, # of Hours per day:		# of Days per week:	
Pro-Rated:	Yes or No		
Temporary or Permanent Position:	Replacing:		
If Temporary, End Date:		Replacing:	
Type of Certificate(s):			

Support Staff

Name of Employee:			
Position:			
School Year:		Start Date:	
Full or Part Time :		Building:	
10 or 12 Months:		If 10 Months, 180 or 200 days:	
Hours to be worked: e.g. 8:00 a.m. to 2:30 p.m.			
# of hours per day worked excluding lunch : e.g. 6 hours		# of days per week worked:	
Step:		Rate:	Stipend:
Total Salary:			
Pro-rated:	Yes or NP		
Temporary or Permanent Position:	Replacing:		
If Temporary, End Date:		Replacing:	

Is start date retroactive?: Yes or **No**

If yes, is salary less sub pay previously paid?: Yes or No

Attachments:

Certificates: _____

Resume: _____

Application: _____

References: _____

Administrator/Supervisor Signature

Date