



**COAST UNIFIED SCHOOL DISTRICT  
REQUEST FOR JOB OPENING**

Position \_\_\_\_\_ Department \_\_\_\_\_ Site \_\_\_\_\_

Certificated FTE \_\_\_\_\_  Classified Number of Hours Per Day \_\_\_\_\_

New Position  Replacement Position  Replacement For \_\_\_\_\_

Number of Months Per Year  12  11  10  DOSA

Step/Column \_\_\_\_\_ Salary Range \_\_\_\_\_ to \_\_\_\_\_ Stipend \_\_\_\_\_

Job Announcement to be Advertised Internally \_\_\_\_\_ Publicly \_\_\_\_\_

Post Internally At Santa Lucia  Coast Union  Grammar School  Leffingwell/Community Day School

Application Closing Date Internally \_\_\_\_\_ Publicly \_\_\_\_\_

Request Initiated By \_\_\_\_\_ Date \_\_\_\_\_

Program/Funding Source \_\_\_\_\_

Superintendent's Approval \_\_\_\_\_ Date \_\_\_\_\_

Business Manager's Clearance \_\_\_\_\_ Date \_\_\_\_\_

Budgetary Charge Codes - - - - - - - - - \_\_\_\_\_ %

Budgetary Charge Codes - - - - - - - - - \_\_\_\_\_ %

Budgetary Charge Codes - - - - - - - - - \_\_\_\_\_ %

Remarks/Justification \_\_\_\_\_

Interview Committee Will Consist of \_\_\_\_\_ / \_\_\_\_\_

/ \_\_\_\_\_ / \_\_\_\_\_

**Applicants Interviewed**

Name	Interview Date/Time	Reference Check
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Listed below is the applicant recommended by the Committee for employment in the above position:

Applicant \_\_\_\_\_ Recommended Date of Employment \_\_\_\_\_

References Have Been Checked  Credentials Verified

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Superintendent's Approval \_\_\_\_\_ Date \_\_\_\_\_

Board of Trustees Approval On \_\_\_\_\_

**Distribution of Copies:**

- After Board Approval - Filed with Application
- After Superintendent's Approval - Manager
- While Manager Reviews - Account Clerk
- After Superintendent's Approval of Selection - Manager
- Payroll