

## Instructional Support Appointment Recommendation

Submitted by:	Program:	Date:
Directions: Complete entire form an	d submit with required attachments (in	ncomplete forms will be returned).
Type of Employment (check one)  Probationary Appointment  Provisional Appointment  Part-time (less than 1.0 FTE)  Name:	Tempor	Seasonal Help rary Assignment
Address:		
Effective Date of Appointment:		
Start:		
End:	(end date only for seasonal or tempora	ary appointment)
Salary:	Step:	
New or Continuing Position (check one New Continuing/Replacement – who p	reviously held the position?	
Has candidate been pre-approved by Civ		No N/A
	ii service? ies	INO IN/A
Location of Position:  Bldg:	D.	
Employee's Education/Employment B	ackground: Provide a detailed summary of e	education, degree, previous work experience, Please attach an additional sheet if more space
Approval:  Assistant Superintendent/I	Director Date Supervisor of Hu	man Resources Date
Assistant Super intendent/L	mector Dute Supervisor of this	mun resources Dute
District Superintendent	Date	
Statement for Conditional/Emergency Conditional Appointment Form Retirement Information for New	Ciched)  ☐ Fingerprint appointment scheduled for ☐ Employment Application ☐ Copy of Certification/Transcripts (if applicable) ☐ Civil Service Provisional Form (if applicable) ☐ Civil Service Temporary Form (if applicable)	Reference Checks (completed by administrator) Copy of Request for Position Employment Search Summary Form I-9 Employment Eligibility Form W-4 Federal Withholding IT 2104 State Withholding