

Beacon City School District

Memorandum For Board Action

BOE Meeting Date:

Motion to:

\_\_\_\_\_

Full Legal Name: \_\_\_\_\_ Employee Position/Title: \_\_\_\_\_

Home Address: \_\_\_\_\_ Posting number: \_\_\_\_\_

\_\_\_\_\_

Please check

one:

New Employee

Current BCSD

Employee

Effective Date: \_\_\_\_\_  
(Date employee will start or end work)

Name of person being replaced: \_\_\_\_\_  
(if applicable)

Salary / Stipend\* \_\_\_\_\_ Step: \_\_\_\_\_ Probationary Position?  
*\*please leave blank for district office to complete*

Union Contract: \_\_\_\_\_ Hourly/Max. Hrs.: \_\_\_\_\_ Location: \_\_\_\_\_

Additional Comments/Information related to item: \_\_\_\_\_

Tenure area: (if applicable)

Certification: (if applicable)

Check all that apply:

|                          |                |                          |                       |
|--------------------------|----------------|--------------------------|-----------------------|
| <input type="checkbox"/> | Application    | <input type="checkbox"/> | Fingerprint Clearance |
| <input type="checkbox"/> | Resume         | <input type="checkbox"/> | Resignation Letter    |
| <input type="checkbox"/> | Recommendation | <input type="checkbox"/> | Bids / Contracts      |
| <input type="checkbox"/> | Certification  | <input type="checkbox"/> | Other:                |

Submitted by: \_\_\_\_\_

Approval: \_\_\_\_\_

Print Name: \_\_\_\_\_

Dr. Matthew Landahl, Superintendent of Schools

Date: \_\_\_\_\_

Date: \_\_\_\_\_