

RECOMMENDATION FORM
(Instructional)

THIS FORM MUST BE COMPLETE BEFORE RETURNING TO HUMAN RESOURCES OFFICE

INTERVIEWING TEAM – Chairperson: _____ Date: _____

Members: _____

Recommended applicant:

Name
Address
Telephone
Social Security
Account Code: - - - - - - fund – function – object – organization – operation – subject matter

ASSIGNMENT

Building _____ Position/Grade _____
Status _____ LTS _____
Replacing _____

EDUCATION

College (Undergraduate) _____
Degree _____ Year _____
Major _____ GPA _____

College (Graduate) _____
Degree _____ Year _____
Major _____ GPA _____

Extra Credits _____ Year _____
GPA _____

Other applicants who were interviewed:

1.	Name	_____
	Address	_____
	Telephone Number	_____
2.	Name	_____
	Address	_____
	Telephone Number	_____
3.	Name	_____
	Address	_____
	Telephone Number	_____
4.	Name	_____
	Address	_____
	Telephone Number	_____

Reasons for recommending this candidate:

Demonstration Lesson:	Date Performed: _____	Building Location: _____
	Group demo was given to _____	(i.e., summer school class, etc.) _____

References with whom you spoke regarding the recommended candidate: (may be taken directly from application)

1.	Name	_____
	Position	_____
	Address	_____
	Telephone Number	_____
2.	Name	_____
	Position	_____
	Address	_____
	Telephone Number	_____
3.	Name	_____
	Position	_____
	Address	_____
	Telephone Number	_____

Signature

Date