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<u>Community</u>	J Schools

TO:	Human Resources						
FROM:	(Check all that apply) Adult Ed Enrichment	Child ( Beacon		Specia Other	l Ed Para		
RE:	RECOMMENDATION TO HIRE, or INTERNAL ASSIGNMENT CHANGE						
DATE:							
Name:							
(First)		(Middle)		(Last)			
New Hire Title:		ASHER ONLY:	Pay Rate	, Acct #			
Change of Assi	gnment:						
Building:	(From)		(To) tract Hrs:	<i>(Eff. Date</i> Have Hrs <b>(</b>	?) Changed? Y/N		
SPECIAL EDU	CATION:						
ACT 18	Beacon One-on-One (BESSS Contract)   Program Assistant (BESSS Contract)   Behavior Specialist II (BESSS Contract)   Behavior Specialist I (BESSS Contract)   Day-to-Day Substitute						
IDEA		If known					
	<u>FTK</u>	_Special Educa	Special Education Para-Individual Aide (FTK) (SSEPA Union)				
<u>Southgate</u> (General Fund)		Special Education Classroom Para (SSEPA Union)					
IDEA		_ If known	If known				
I acknowledge	that all qualifications	required for th	ne above position h	nave been met:			

Signature of Administrator/Director/Supervisor

Date

For HR Use

Paperwork Complete: \_\_\_\_\_ Notified Supervisor: \_\_\_\_\_

If Special Education, Attach this to Routing Form