

NEWBURGH ENLARGED CITY SCHOOL DISTRICT
PROFESSIONAL POSITION RECOMMENDATION FORM

The information listed below must be forwarded to HR with this recommendation form. Incomplete checklists will be returned and the recommendation will not be forwarded to the Superintendent for consideration.

POSITION _____

POSTING NUMBER _____

LOCATION _____

I AM RECOMMENDING _____, FOR THE FOLLOWING REASONS:

Has the candidate been notified? _____ Yes _____ No

RESUME MUST BE ATTACHED

PROOF OF CERTIFICATION MUST BE ATTACHED

INTERVIEW QUESTIONS MUST BE ATTACHED

DATE(S) OF INTERVIEW _____

NAME AND POSITION OF INTERVIEW TEAM MEMBERS

NAME	POSITION
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

REFERENCE CHECK (see attached)

LESSON PLAN FOR DEMO LESSON MUST BE ATTACHED

OTHER CANDIDATES INTERVIEWED

NAME	DIVERSE (Y OR N)
_____	_____
_____	_____
_____	_____

ALL NOTES TAKEN BY INTERVIEW TEAM MEMBERS MUST BE COLLECTED AND SUBMITTED WITH THIS FORM.

PRINCIPAL SIGNATURE _____