THE SCHOOL BOARD OF NASSAU COUNTY, FLORIDA 1201 Atlantic Avenue • Fernandina Beach, Florida 32034 AN EQUAL OPPORTUNITY EMPLOYER

RECOMMENDATION FOR ADMINISTRATIVE PERSONNEL

Location:		Date:		
I recommend the following applicant for the school year.				
Name:		DOB:		
	as it appears on the Applicant's Social Security Card	SS #:		
Address:		Phone:	_	
City:		State:	Zip:	
	Automated Staff Data Elements:	Race:	Sex:	
Position For Which Recommended:				
Highest Level of Training:	☐ Bachelor's ☐ Master's ☐ Specialis	st 🗆 Doctorate		
	☐ High School/Associates (Vocational Teac	hers only)		
Type of Certificate:	Type of Certificate: \Box S.O.E. \Box Temporary \Box Professional			
Areas of Certification:				
Types of Previous Employment, Dates and Location (Use reverse side if needed):				
(1)				
(2)				
Type of Contract Recommended: Effective Date of Employment:				
Respectfully Submitted,				
Signature of Superintendent	Signature of Prir	ncipal or Director	_	
Signature of Personnel Representative and Date				
Please Check Appropriate Boxes	: Pre-Employment Screening Form ((REQUIRED)		
	☐ Interview Forms attached (includes	all persons intervi	ewed for this position)	
Please Check One:	☐ New Position			
	☐ Replacement for: Type in National Ty	m <i>e</i>		
Type in traine				