

**Athol-Royalston Regional School District
Recommendation to Hire**

Today's Date _____

Name: _____

Position: _____

School(s): _____

Suggested Start Date: _____
(to be filled in by school administrator)

New Position or
Replacement for: _____

Actual Starting Date: _____
(to be filled in by Superintendent's Office)

Transfer from (if applicable) _____
CORI completion date: _____

Number of candidates screened:

Names of candidates interviewed: by: Principal Interview Committee Director of Pupil Services

Qualifications of recommended candidate: Is Candidate Licensed? Yes No
If yes, in what area? _____

Justification for appointment:

Level _____ Salary _____ FTE: _____

Principal's Signature Date

Director/Supervisor's Signature (if applicable) Date

Hiring checklist and all relevant documents must be attached before submitting for funding source and Superintendent's approval otherwise no action will be taken. There s no authorization for a formal offer of appointment until school administrator's receive a return copy of this form, signed by the Superintendent.

Funding Source _____

Final Approval

Business Manager's Signature Date

Superintendent of Schools Date