



**BRIGHTON AREA SCHOOLS
RECOMMENDATION TO HIRE (New Employees Only)**

Applicant Information

| | | | |
|------------------------------|------------|---------------------------|-------|
| Position: | _____ | | |
| Posting #: | _____ | Building/Location: | _____ |
| Name: | _____ | Email: | _____ |
| Address: | _____ | | |
| City/State/Zip: | _____ | Phone: | _____ |
| Student under age 18? | YES | NO | |

Position Information

| | | | |
|--|--|--|--|
| Effective Date: | _____ | Pay Rate: | _____ |
| Hours per Day: | _____ | Days per Week: | _____ |
| | | Hours per Week: | _____ |
| Reason for Hire: | New Position <input type="checkbox"/> | Vacancy <input type="checkbox"/> | Chg. In Staffing Needs <input type="checkbox"/> |
| Affiliation: | BEA <input type="checkbox"/> | BESPA <input type="checkbox"/> | Non-Affiliated <input type="checkbox"/> |
| | | EduStaff <input type="checkbox"/> | |
| For Special Ed Para Pros please indicate program: | | | |
| MICI <input type="checkbox"/> | EI <input type="checkbox"/> | HI <input type="checkbox"/> | RR <input type="checkbox"/> |
| | MOCI <input type="checkbox"/> | LD <input type="checkbox"/> | LRE <input type="checkbox"/> |
| Account#: | _____ | | |

Administrator Signature _____
Date

Human Resource Approval _____
Date

Business Office Approval _____
Date