



NEW HIRE RECOMMENDATION FORM

Phone: 706-826-1000 FAX: 706-826-4632

School/ Department	Principal/ Administrator	Date
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I attest that the following information is accurate and has been verified. This form in no way constitutes an agreement of employment with the candidate. Principal Initials:

NEW HIRE EMPLOYEE INFORMATION		
Last Name	First	M I
Position/Content	GA Teacher Certificate # / Level / Field(s)	
Social Security Number:	Start Date:	Funding Source
REFERENCE CHECK (PLEASE CONTACT AT LEAST TWO REFERENCES.)		
Name/Title	Name/Title	Name/Title
Mode of Contact:	Mode of Contact:	Mode of Contact:
Previous RCSS Employee:	Year(s) Employed:	Reason for Separation:
Person Replacing:		
Non- Traditional Teacher Addendum		
<i>(I attest that a teacher with a valid GAPSC certificate was not available to fill this position.)</i>		
Does the candidate have experience with students? If yes, please explain.		
Does the candidate have a Bachelor's degree or higher in a related field for recommendation? List degrees.		
Was a certified candidate available? If yes, explain why you are recommending this candidate.		
Principal's Signature:	Assistant Superintendent's Signature:	