

South Panola School District

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Providing Opportunities for Educational Excellence

Department of Personnel STAFF RECOMMENDATION FORM Date: Soc. Sec. No: Address: D.O.B. Gender: Male Female Race: Phone: Effective Date: _____ Cell number: Job/Position: License Type: (Elem., Secondary, Admin, etc.) Class: _____ (A, AA, AAA, AAAA) Endorsement Area(s): , , , License Number: Years of Experience: Principal/Director signature: Date: Department of Personnel Use Only Date Received: _____ Approved for Hire: Yes ___ No __

Date

Authorization