



Wild Rose Public Schools

IUOE/Exempt Recommendation for Hire

Please forward this completed form to the Human Resources Supervisor along with the Support Staff Information form and any attachments.

Shortlist and Interview:

Competition Number: _____

Work Location: _____

Shortlisted Candidates: _____

Members on Interview Committee: _____

Criteria used to Hire: _____

New Hire Information
Successful Candidate:

Name: _____

Start Date: _____ End Date: *(if applicable)* _____

Number of Hours: ___ Per Day or ___ Per Week

Type of Position: ___ Regular or ___ Temporary

___ Full Time or ___ Part Time

Wage Schedule Grid Placement Recommendation (for IUOE): _____

(For Initial Hire – new to Wild Rose - please refer to AP 430 & attach copies of certificates & proof of prior experience)

Comments/changes from initial posting:

Signature
Location Manager/School Principal

Date

Office Use Only:	
_____	_____
Human Resources Supervisor	Date