ROCK HILL SCHOOLS LONG TERM SUB RECOMMENDATION FORM (LTS)

Applicant's Name:

School Assigned:

Grade/Subject Vacancy:

Employee that requires a LTS:

Information Obtained from References:

Rationale for Hiring (special skills, interest, and related experiences): Professional Experiences

Suggested Date(s) of Employment:

Other applicants interviewed/dates of interviews:

Administrator's Name/Date:

Applicant's Certificate Number: Year's Experience: Degree Level:

For Office Use Only: Acct. No.: Daily Rate: