Mt. Diablo Unified School District

Certificated Personnel Assignment Recommendation

(Rec 1 Form)

Completed form must be received by the 10th of the month for the change to be effective with the current month's payroll (end of current month). If received after the 10th of the month, the change will be effective on the following month's payroll. Send completed form to Certificated Personnel office. Fax to (925) 676-4092 and keep the original, or forward the original and make a copy for your records.

Name of Person Recommended _____ Home Phone Number _____ Email Address _____

Employee ID _____ Location/Site _____ Start Date (and End Date if applicable) _____

Check all that apply

- ☐ New Hire (remember – Personnel makes the official offer to the new hire)
- ☐ Ed Join Applicant (please provide applicant's resume, application, etc.)
- ☐ FTE change
- ☐ Funding Change
- ☐ Rehire TEMP
- ☐ Return from LOA or FCL
- ☐ Job Share
- ☐ Assignment Change
- ☐ Voluntary Transfer
- ☐ Involuntary Transfer
- ☐ Willie Brown

Assignment (Give the grade level, specific course title, and number of periods taught for each course. If Special Ed., indicate if it is collaborative, and mild/moderate or moderate/severe.)

Grade Level, Course Title _____ Grade Level, Course Title _____

Grade Level, Course Title _____ Grade Level, Course Title _____

Location/Site Change

From _____ To _____ (Personnel will make the offer)

Change in FTE

From _____ To _____ _____ Employee Signature and Date(required)

Funding: Position (e.g., TCHRELEM, TCHRSDC, etc.)	FTE	Org Key Site	Program	Func	Object	% (total = 100%)
Total Employee FTE						
TCHRSEC	0.80	388	0700	10	1100	80%
		388	3970	10	1100	15%
		388	3099	10	1100	5%

Print Name of Administrator _____ Administrator's Signature and Date _____

To be completed by Personnel

- ☐ Accepted
- ☐ Declined _____

Categorical funding approval: _____ Signature of Categorical Administrator