

**FRANKLIN SCHOOL DISTRICT - SAU 18
NOMINATION FORM**

1. Nominee: First Name _____ MI _____ Last Name _____
2. Address: Street _____ City _____ ST _____ Zip _____ 3. Telephone: () - _____
4. Title of position: _____
5. Replacement for: _____ 6. New position ☐ 7. Is this new position budgeted? ☐ Yes ☐ No
8. School(s) Involved: ☐ PRESCHOOL ☐ SMITH ☐ FMS ☐ FHS ☐ SAU ☐ Other _____
9. Employee resumé and application: ☐ Attached ☐ On file in SAU Office
10. Contract starts on (mm/dd/yy) _____ and ends on (mm/dd/yy) _____
11. Contract contingent on student remaining in current special education placement (check one): ☐ Not Applicable ☐ Yes
12. Special instructions/comments regarding teacher contract or support staff contract: _____
13. New Hampshire Certification (Attach Copy): _____
14. Nomination recommended by Principal/Director: _____ Date: _____
15. Teacher's contract includes ____ days.
16. Track and step on teacher salary schedule:
Track: ☐ BA ☐ MA Salary: _____ Step _____
17. Funding Account: School Budget Account #: _____
(Please provide appropriate account/funding number)
- State/Federal Project Title: _____ and Account # _____
18. Support staff contract includes: _____ Workdays _____ Holidays _____ Vacation Days _____ Totaling _____ Days
19. \$ _____ Hourly Rate x _____ Hours/Day x _____ Total Days = \$ _____ Total Salary

FOR SAU OFFICE USE ONLY

20. Approved by Business Administrator/Grant Manager: _____ Date: _____
21. Nomination approved by Superintendent: _____ Date: _____
22. Contract issued on: _____
23. Contract Entered into Payroll System: _____ (Date)
24. Entered in DOE: ☐