SOLANO COMMUNITY COLLEGE DISTRICT

RECOMMENDATION FOR EMPLOYMENT

Instructions: Complete **one** form for each recommended candidate, submit all interview material, and completed reference check forms. If this was an emergency hire, indicate in the below section under justification for employment.

Department Manager:	Circle the appropriate classification:	Regular Classified	Regular Faculty	Adj. Faculty	Management
Interview Date/Time: Applicants Interviewed: Name of finalist(s) for 2nd Level Interview (If applicable): Name of Recommended Candidate (Provide ONLY one name): Justification of Employment for Recommended Candidate: (Cite reasons for selection based on candidate's qualifications.) Committee Chair: Department Manager: Department Manager: Date: For Personnel Office Use Only Candidate Contacted By: Date: Status of Job Offer: Date of Employment: To Governing Board:	Job Title:				
Applicants Interviewed: Name of finalist(s) for 2 nd Level Interview (If applicable): Name of Recommended Candidate (Provide ONLY one name): Justification of Employment for Recommended Candidate: (Cite reasons for selection based on candidate's qualifications.) Committee Chair: Department Manager: Date: Vice President Approval: For Personnel Office Use Only Candidate Contacted By: Date: To Governing Board:	Committee Members:				
Applicants Interviewed: Name of finalist(s) for 2 nd Level Interview (If applicable): Name of Recommended Candidate (Provide ONLY one name): Justification of Employment for Recommended Candidate: (Cite reasons for selection based on candidate's qualifications.) Committee Chair: Department Manager: Date: Vice President Approval: For Personnel Office Use Only Candidate Contacted By: Date: To Governing Board:					
Name of finalist(s) for 2nd Level Interview (If applicable): Name of Recommended Candidate (Provide ONLY one name):	Interview Date/Time:				
Name of finalist(s) for 2nd Level Interview (If applicable): Name of Recommended Candidate (Provide ONLY one name): Suggested Start Date: Justification of Employment for Recommended Candidate: (Cite reasons for selection based on candidate's qualifications.) Committee Chair: Department Manager: Department Manager: Vice President Approval: For Personnel Office Use Only Candidate Contacted By: Date: Status of Job Offer: Date of Employment: To Governing Board:	Applicants Interviewed:				
Name of Recommended Candidate (Provide ONLY one name):					
Committee Chair:					
Department Manager:	Justification of Employment for	Recommended Candidat	te: (Cite reasons for sel	ection based on candidat	e's qualifications.)
Department Manager:	-				
Department Manager:					
Department Manager:					
Vice President Approval:	Committee Chair:				Date:
For Personnel Office Use Only Candidate Contacted By: Date: Status of Job Offer: Date of Employment: To Governing Board:	Department Manager:				Date:
Candidate Contacted By: Date: Status of Job Offer: Date of Employment: To Governing Board:	Vice President Approval:				Date:
Date of Employment: To Governing Board:		For Persor	nnel Office Use Only		
	Candidate Contacted By:	Da	te:	Status of Job Offer:	
MO	Date of Employment:	То	Governing Board:		
MQ: Range/Step:	MQ:	Ra	nge/Step:		
Superintendent/President Approval: Date:	Superintendent/President Approval:			Date:	
Human Resources Approval: Date:	Human Resources Approval: Date:				