



**DALLAS COUNTY COMMUNITY COLLEGE DISTRICT  
RECOMMENDATION FOR EMPLOYMENT SUMMARY FORM**

Name: \_\_\_\_\_

Location: \_\_\_\_\_

Ethnicity: \_\_\_\_\_

Sex:  Male  Female

Address: \_\_\_\_\_

*Street*

*City*

*State*

*Zip*

**SALARY AND CONTRACT INFORMATION**

Job Title: \_\_\_\_\_

Job Title Code: \_\_\_\_\_

Job Classification: Indicate if:  New Position\* or

Replacement Position\* (Please name the previous incumbent, \_\_\_\_\_ tell us if this is a

replacement due to a resignation, retirement, termination,  resignation \_\_\_\_\_ and note which Board agenda the action was presented on \_\_\_\_\_)

Indicate if:

Faculty

Administrator

Intern

Visiting Scholar

Salary: \_\_\_\_\_

Indicate if:

Grant-funded

Partial Contract

Temporary Position

Business & Travel Expense

(Provide Name of Grant in remarks)

(List Percent  %)

(Admin. Only)

Indicate Dates of Appointment (list): \_\_\_\_\_

through \_\_\_\_\_

**EDUCATION** (List degrees & where earned)

| <i>Degree</i> | <i>Discipline</i> | <i>College/University</i> | <i>City</i> | <i>State</i> |
|---------------|-------------------|---------------------------|-------------|--------------|
|---------------|-------------------|---------------------------|-------------|--------------|

**RELEVANT WORK EXPERIENCE (Include DCCCD Experience)**

| <i>Position</i> | <i>Employer</i> | <i>City</i> | <i>State</i> |
|-----------------|-----------------|-------------|--------------|
|-----------------|-----------------|-------------|--------------|

|          |          |      |       |
|----------|----------|------|-------|
| Position | Employer | City | State |
|----------|----------|------|-------|

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| Position | Employer | City | State |
|----------|----------|------|-------|

**REFERENCE CHECKS**

n/a

*\*Remarks: Include thorough justification for the position including any special grant conditions. This is especially important if filling a NEW or Replacement positions. Please provide justification (including specific details surrounding the creation/need of the position. Include details such as name of the previous incumbent when filling replacement positions.*

ATTACHMENTS (check all attached):  Application for Employment  Notice of Vacancy

I certify that this individual meets the minimum educational and experiential requirements of the position as listed on the position job description and in accordance with DCCCD guidelines. I also certify that this individual has provided to my office Official College Transcripts and that the attached copy is from these documents, which remain on file at this location. Signed (location HR): \_\_\_\_\_

For \_\_\_\_\_ Board Agenda.

Date Submitted: \_\_\_\_\_ by: Location HR

Location Signature: \_\_\_\_\_