Department of Human Resources
Opening Gateways to Human Potential

CHICAGO PUBLIC SCHOOL
DEPARTMENT OF HUMAN REOUSRCES
HR EMPLOYEE SERVICE

ASSISTANT PRINCIPAL NOMINATION FORM

This form must be submitted to appoint an individual as an Assistant Principal. The nominated individual must possess a Type 75 Administrative Certificate issued by the Illinois State Board of Education.

(Please print or type)

School: _____ Elementary □ H.S. □

Name of Principal: _____

Nominated Assistant Principal: _____

Employee ID Number: _____

Oracle Position Number: _____ Funding Source: 210 □ 234 □ Other ____

Effective Date of Appointment: _____

Please appoint the individual identified above to the Assistant Principal of my School;

_____ _____
Signature of Principal Date

I accept the appointment as the Assistant Principal at the above named school. I understand that by accepting this administrative appointment, I relinquish the right to bump back into a teaching position.

_____ _____
Signature of Nominated Assistant Principal Date

Completed form should be submitted by fax or mail to:

Department of Human Resources
HR Employee Service
320 North Elizabeth, 1st Floor
Chicago, Illinois 60607
Mail Run 38
Fax: (773) 553-6668

_____FOR OFFICE USE ONLY_____

AP Grade: _____ Step: _____ Salary $_____

Approved By: _____

Revised: 10/07