

AGENDA REQUEST FORM

| | THE | SCHOOL | L BOAKD OF BROV | VARD COUNTY, FLORIDA | 4 | | |
|-----------------------|--------------------------------|-----------------------------------|------------------------------|---|--------------|---------------------|---------------|
| Eblic School | MEETING DATE | 2017-10- | 03 10:05 - School Bo | oard Operational Meeting | | Special Order R | Request No |
| TEM No.: | AGENDA ITEM | ITEMS | | | | Time | |
| G-1. | CATEGORY | G. OFFIC | CE OF HUMAN RES | OURCES | | Time | |
| | DEPARTMENT | Talent Ad | equisition & Operatio | ns (Instructional Staffing) | | Open Ager | _ |
| ITLE: | | | | | | ◯ Yes | ● No |
| | nendations for Instructional | Appointmen | ts and Leaves for 2017-2 | 018 School Year | | | |
| | | | | | | | |
| EQUESTED | ACTION: | | | | | | |
| ummary and resp | ective lists for instructional | staff. All red | commendations are made | es as listed in the attached Execu with the understanding that these tion and The School Board of Bro | e individual | | |
| UMMARY EX | PLANATION AND BA | ACKGROU | JND: | | | | |
| | commendations for Instruct | ional Employ | ees include the following | items: | | | |
| Teacher Approva | als orary Hourly Teachers | | | | | | |
| Cascatato, I c.i.ip | crany mounty readment | | | | | | |
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| 011001 004 | DD 00410 | | | | | | |
| CHOOL BOA | | otion O | Cool 2: Continue | | | faativa Cammunia | |
| INANCIAL IM | High Quality Instruction | tion (| Goal 2: Continuou | is improvement | Oal 3: En | fective Communic | ation |
| | | District Fu | nding for the positions have | ve been allocated in the school ar | nd denartm | nent hudgets | |
| icic will be no illi | andar impact to the ochoo | District. Tu | naing for the positions ha | ve been anotated in the school at | ia acpartin | ient budgets. | |
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| XHIBITS: (Li | st) | | | | | | |
| 1) Appointment | s and Leaves | | | | | | |
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| BOARD ACTION | ON: | SOURCE OF ADDITIONAL INFORMATION: | | | | | |
| | | | Name: Susan T. Rockelman | | | Phone: 754-321-2324 | |
| | | | | | | | |
| (For Official Sci | hool Board Records Office Only | y) | Name: | | | Phone: | |
| HE SCHOC enior Leader | DL BOARD OF BE | ROWARI | O COUNTY, FLO | / ipprovou iii v | | | |
| | s - Chief Human Res | ources & l | Equity Officer | Board Meetin | _ | | |
| | | | · • | _ | By: _ | | |
| ignature | | | | | | School Board Cha | air |
| | | | | | | | |
| | | | | | | | |

Electronic Signature
Form #4189 Revised 08/04//2017
RWR/ CJN/STR:lb