

COLVILLE SCHOOL DISTRICT NO. 115

VACANCY NOTICE

ADVERTISE: In-District_____

Out -of-District_____

POSITION:_____

NEW _____

Or _____

REPLACEMENT FOR _____

LOCATION:_____

STARTING DATE:_____

IF TEMPORARY, ENDING DATE: _____

CERTIFIED

CLASSIFIED

Program Name & Number _____

Program Name & Number _____

Full Time_____

Number of Hours Per Day _____

Half Time_____

Time of Day _____

Other_____

Number of Days Per Year _____

Step/Rate of Pay or Stipend_____

Step/Rate of Pay or Stipend _____

Supervisor_____

Supervisor _____

(Signatures required by the Administrator(s) responsible for the programs the position is being paid out of)

Signature of Administrator/Supervisor

Signature of Administrator/Supervisor

Date _____

Date _____

Superintendent/Personnel Manager

Date _____

District _____

Office _____

Use _____

VACANCY **CANNOT** BE FILLED UNTIL APPROVED BY THE SUPERINTENDENT OR DESIGNEE

ATTENTION ADMINISTRATORS: Any salary quote for an employee shall be directed to the district office.