



NEWCASTLE PUBLIC SCHOOLS

Support (Paraprofessional) Hire

Candidate Name: _____ Today's Date: _____

Position: Regular Para Special Ed Para Replacing: _____

Site: High School Middle School Elementary School Early Childhood

Hours Per Day: _____ Hourly Rate: _____

Years of Experience: _____ Start Date: _____

High School Graduation/GED Date: _____

Federal Programs: Yes No (project code: _____)

Retired under OK TRS: Yes No (currently drawing benefits)

Resume Attached: Yes No

References Checked: Yes No

OSCN Background Check Done: Yes No (www.oscn.net/dockets/Search.aspx)

Social Media Check Done: Yes No

Tier I Paraprofessional Qualifications: (One of the following—verification must be attached)

Associate's Degree (College Name): _____ College Hours (48 min): _____

Para Pro Test Score: _____ OGET Date Passed: _____

Bronze Work Key Certificate Date: _____

Tier II Special Ed Paraprofessional Qualifications:

Pepper Training Completion Date: _____ (Certificate Attached)

CPR Certification Expiration Date: _____ (Copy Attached)

GCN Completion Date: _____

I understand that I must obtain ALL three requirements within 17 weeks of the start date of my employment or my contract will terminate on _____.

Employee Initials

Building Principal Date

Special Services Director Date
(Approval needed if a Tier II Para)

Superintendent/CFO Approval Date

Employee Acceptance Date