



WILSON COUNTY SCHOOLS REQUEST FOR ADDITIONAL PERSONNEL FORM

(Central Office Administrators)

Supervisor Department

Title of Position Requested: _____

Licensed

Classified

Description of Duties and Rationale for Position: _____

Budget Code: _____

Salary Grade: _____

Executive Director's Signature Date

TO BE COMPLETED BY FINANCIAL SERVICES

Approved

Denied

Executive Director of Financial Services Signature Date

TO BE COMPLETED BY HUMAN RESOURCE SERVICES

Date Received: _____

Approved

Denied

Assistant Superintendent's Signature/Designee Date