

## THE SCHOOL DISTRICT OF PALM BEACH COUNTY DEPARTMENT OF CHARTER SCHOOLS

## **Charter School Pre-Clearance for Instructional** Applicants/Paraprofessionals

School Administrator: Complete this form and fax it to the Certification Office at (561) 434-8992 or attach and email to CertInfo@palmbeachschools.org. Include transcripts and evidence of the Para Professional Exam. Official documents will need to be seen when the applicant comes to complete Charter School Employment Authorization Form. Do not send applicant to the District with form PBSD 2177 Charter School Authorization for Employment, Contract Services, Board Member, Vendor until after you receive this form with "Yes" circled.

1. Applicant I	nformation						
First Name		Middle Name		Last Name			
Employee ID #	Last 4 digits of SS#	Hire Date (Month/Day/Year)		Dept of Ed # (Listed on Statement or Cert)			
2. School Info	ormation						
MSID#	School Name				School Fax #		
Administrator Comp	oleting Form (first and last i	name)			1		
Subject(s) Assign	ed						
If ESE, provide course code numbers N/A							
Grade Level Assigned			Exceptionality (Gifted, Autism, etc.)			□ N/A	
FOR DISTRICT USE ONLY DO NOT WRITE BELOW THIS LINE							
District Certifi	ication Action						
YES [	In-field Highly Qualified Subject Area Exam	Send applicant to the District with form PBSD 2177 Charter School Authorization (CSA) and a copy of the I-9. Complete the steps listed on the CSA in the order listed on the form.					
	NO	Applicant is not clea	Applicant is not cleared, do not send them to the District Office.				
If NO, we need th order to clear the	e following items in applicant						