



NEW HIRE TEACHER WORKSHEET

State Form 56919 (3-20)

INDIANA STATE PERSONNEL DEPARTMENT

Name	PeopleSoft identification number
Title of class and code	
Teaching License number	Date of Issue (month, day, year)

Place of Employment	Begin Date (month, day, year)	End Date (month, day, year)	Full Time / Part Time	Total Years / Months
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Special Certifications	Education: <input type="checkbox"/> BS Education	Total Teaching Experience:
	<input type="checkbox"/> MS Education	
	<input type="checkbox"/> PhD / EdD	

Comparative Employees:

Employee Identification Number	Years of Experience	<input type="checkbox"/> BS <input type="checkbox"/> MS	Annual Salary
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Employee Identification Number	Years of Experience	<input type="checkbox"/> BS <input type="checkbox"/> MS	Annual Salary
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Salary Offered

Salary Accepted

Rationale for Rate of Salary Offered (for example, a specialty course) :

Signature: _____

Date (month, day, year) : _____