

# PERSONNEL FORM

NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

\_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE # \_\_\_\_\_

## **DIRECTIONS:**

1. All special education personnel must complete this form. This includes all special education administrative staff, classroom teachers, teacher consultants, ancillary support staff, teachers of adaptive physical education, vocational education teachers in special needs programs, teacher aides, individual health/behavior aides, nurses and any other specialized instructional or diagnostic staff.
2. Clerical staff, bus drivers, custodial and food preparation staff working for special education **DO NOT NEED TO COMPLETE THIS FORM.**
3. Fill out ONE form for each special education staff member in your district. Complete all items which apply to each staff member.

Intermediate School District Number: 21

Local School District: \_\_\_\_\_

Building Name: \_\_\_\_\_

Work email address: \_\_\_\_\_

**Program/Service Code and FTE (a list of personnel codes appears on the last page)**

This item is composed of two elements: 1.) the program code and 2.) the full-time equivalency for your assignment. The FTE is the percentage of full time you work. If you work half-time, your FTE is .50. If you work full-time, your FTE is 1.0. For example, if you work half-time as a Resource Room teacher you would indicate as shown in Example #1. If you work 4 of 6 periods as an aide at a high school, you would indicate as shown in Example #2.

**Example #1:**

Program/Service Assignment Code: 194 FTE .5

**Example #2:**

Program/Service Assignment Code: 404 FTE .67

Program/Service Assignment Code: \_\_\_\_\_ FTE \_\_\_\_\_

Program/Service Assignment Code: \_\_\_\_\_ FTE \_\_\_\_\_

**PLEASE ATTACH A COPY OF YOUR CURRENT CERTIFICATE/LICENSE**

Date of Expiration of Certificate/License: \_\_\_\_\_

Date of Employment With District: \_\_\_\_\_

Please call if you have questions about how to complete this form. Return this form to:

**Jenny Corrigan  
Delta-Schoolcraft ISD  
Special Education Services  
2525 Third Avenue South  
Escanaba, MI 49829  
(906) 786-9300, Ext. 202  
FAX (906) 786-9318**

**INSTRUCTIONAL PERSONNEL**

110 Teacher of Mild Cognitive Impairment (SA)  
120 Teacher of Moderate Cognitive Impairment (SA)  
130 Teacher of Severe Cognitive Impairment (SA)  
140 Teacher of Emotional Impairment (SE)  
150 Teacher of Learning Disabled (SM)  
160 Teacher of Hearing Impaired (SL)  
170 Teacher of Visually Impaired (SK)  
180 Teacher of Physically and Otherwise Health Impaired (SC)  
190 Teacher of Severely Multiply Impaired (SA, SL, SK and SC)  
191 Teacher of Early Childhood Special Education Program (ZA)  
193 Teacher of Autistic Impaired (SV)  
194 Resource Room Teacher

**TEACHER CONSULTANT PERSONNEL**

200 Teacher Consultant: AI  
210 Teacher Consultant: MI  
220 Teacher Consultant: EI  
230 Teacher Consultant: LD  
240 Teacher Consultant: HI  
250 Teacher Consultant: VI  
260 Teacher Consultant: OHI & PI  
280 Teacher of Homebound/Hospitalized  
290 Teacher of Speech and Language Impaired Non-classroom Program (Speech Therapist)  
291 Teacher of Physical Education for the Handicapped (Adaptive Physical Education)

**SPECIAL EDUCATION SUPPORT SERVICE PERSONNEL**

310 School Social Worker  
320 School Psychologist  
330 Director of Special Education  
340 Supervisor of Special Education  
360 Occupational Therapist  
370 Physical Therapist

**ADDITIONAL SPECIAL EDUCATION PERSONNEL**

380 Miscellaneous Other Personnel  
381 Audiologist (AU)  
382 Planner-Monitor-Coordinator  
383 Registered Music Therapist (MT)  
384 Registered Nurse (NU)  
385 Orientation and Mobility Specialist (OM)  
386 Registered Recreational Therapist (RT)  
387 Work Study Coordinator (WS)  
388 Physician  
389 Registered Art Therapist (AT)  
403 Instructional Aide (assigned to programs only)  
404 Aide (individual, student assigned persons)  
406 Interpreter for the Hearing Impaired/Deaf