



# San Antonio Independent School District

141 Lavaca Street • San Antonio, Texas 78210-1095

Telephone (210) 299-5606 • Fax (210) 299-5600

## MEMORANDUM

To: Toni Thompson, Associate Superintendent

From: \_\_\_\_\_  
(Principal / Department Head)

Subject:  Coach  Band Recommendation Form

Date: \_\_\_\_\_

I recommend the following individual for the vacancy / assignment below:

Full Name: \_\_\_\_\_

Assignment/Vacancy:  Asst.  Head  Girls  Boys \_\_\_\_\_  
 Asst.  Head  Girls  Boys \_\_\_\_\_  
 Asst.  Head  Girls  Boys \_\_\_\_\_  
 Asst.  Head  Girls  Boys \_\_\_\_\_

Supplemental Duty School Location: \_\_\_\_\_

Home School Location: \_\_\_\_\_

Stipend Start Date (if different from sport start date): \_\_\_\_\_

Effective Date of Sport: \_\_\_\_\_

\_\_\_\_\_  
Principal's Signature

Agreed: \_\_\_\_\_  
(Campus Athletic Coordinator)

Date: \_\_\_\_\_

Agreed: \_\_\_\_\_  
(Executive Director of Athletics)  
(Executive Director of Fine Arts)

Date: \_\_\_\_\_

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**Office Use Only:**

- Reviewed by Associate Superintendent: \_\_\_\_\_
- Cleared by Director of Compensation: \_\_\_\_\_
- Cleared by Recruiter: \_\_\_\_\_

Human Resources:  
\_\_\_\_\_  
Cleared  
\_\_\_\_\_  
Not Cleared