



RETIRED CONSULTANT REQUEST 2024-2025

Instructions: Complete sections 1 and 2 (use a different form for each program/project) and send to the Research Department.

SECTION 1: Requestor Information

Date	<input type="text"/>	Site/School	<input type="text"/>
Requestor's Name	<input type="text"/>	Requestor's Title	<input type="text"/>
Contact Phone	<input type="text"/>	Contact e-mail	<input type="text"/>

SECTION 2: Assignment Details

<input type="checkbox"/> CAASPP	<input type="checkbox"/> ELPAC	<input type="checkbox"/> i-Ready	<input type="checkbox"/> AP	<input type="checkbox"/> Other/Dept:	<input type="text"/>	
Date of training provided by site:		<input type="text"/>	Time:	<input type="text"/>	Hour(s) per day	<input type="text"/>
Date of Assignment:		<input type="text"/>	Time:	<input type="text"/>	Hour(s) per day	<input type="text"/>
Describe how the consultant will assist with the assignment (description must align with retired consultant guidelines):						
<input type="text"/>						
Additional Notes/Special Requests:						
<input type="text"/>						

Retired Consultant Guidelines:

- Consultants' work assignment is on behalf of the District.
- Consultants should only work in a supporting role (not as a substitute teacher, program coordinator, etc.)
- If assignment(s) change from the original request, notify the Research Department for approval.
- Consultants' working hours: 1 day at site is 6 hours.
- Consultants will receive their assignment from the Research Department. **Please do not independently arrange placement with the retired consultants.**

SECTION 3: To Be Completed by the Research Department

Date Request Received:

☐ Approved ☐ Denied Initials: Date:

Consultant	Contact	Research Confirmed	Consultant	Contact	Research Confirmed
		<input type="checkbox"/> Y <input type="checkbox"/> N			<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N			<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N			<input type="checkbox"/> Y <input type="checkbox"/> N

Confirmation sent to Requestor: ☐ E-mail ☐ Phone ☐ Fax ☐ Mail Initial & Date: _____