SANTA MONICA-MALIBU UNIFIED SCHOOL DISTRICT
DEPARTMENT OF HUMAN RESOURCES

DEPARTMENT CHAIRPERSON ASSIGNMENT

SCHOOL NAME: _____ SCHOOL YEAR:_____

PRINCIPAL SIGNATURE: _____ DATE: _____
BOARD DATE: _____

DEPT	DEPT. CHAIR-PERSON	# OF F/T TEACHERS IN DEPT.	# OF PERIODS TAUGHT IN DEPT BY NON F/T TEACHERS	FTE	EDU	HRS	$$