

**Job Requisition Form**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Position Title: | |  | | | | | | Auxiliary: |  | | | |  |
|  | | ***(Attach completed job description)*** | | | | | |  | | | | | |
| Projected Start Date: | | | |  | | | | Department: | | |  | |  |
|  | | | | | | | | | | | | | |
| Pay Status | | | Classification (check one): | | | | | Cost Center: | | |  | |  |
| Salaried: |  | | Full-Time: | |  |  | | Cost center (unit/name) responsible for ad costs: | | | | | |
| Hourly: |  | | Part-Time: | |  | \_\_\_\_\_\_\_% | |  | | | | |  |
|  | | |  | |  | | | Cost center responsible for background check: | | | | | |
|  | | |  | | | | |  | | | | |  |
|  | | | | | | | | | | | | | |
| *Requestor's Name:* | | |  | | | | *Requestor's Phone Number:* | | | | |  |  |
|  | | | | | | | | | | | | | |
| *Requestor's Title* | | |  | | | | *Request Date:* | | |  | | |  |
|  | | | | | | | | | | | | | |

**Job Information:**

**Reason for Requisition:**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | New Position | |  |  | Budgeted | | Monthly Pay Rate: | | $ | |  |
|  |  | |  |  | Not Budgeted (Attach Business Justification) | | | |  | |  |
|  | Replacement Position | | | Name of former employee: | | |  | | | |  |
|  |  |  | | Last day worked: | |  | | Last Salary: | | $ |  |
|  | | | | | | | | | | | |

**Justification Section:**

|  |
| --- |
| Please indicate reasons/justification for requisition (attach additional documentation if necessary): |
|  |

**Compensation/HR Section (HR Office Use Only):**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| New Hire's Name: |  | | Hire Date: |  |  |
| Monthly Pay Rate: | $ | Recruitment Source: | |  |  |
|  | | | | | |

**Approval Section:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |
| *Requestor's Signature* |  | *Date* |  | *Human Resources* |  | *Date* |  |
|  |  |  |  |  |  |  |  |
| *Program Director/Executive Director* | | *Date* |  | *Post Award Analyst* |  | *Date* |  |
|  |  |  |  |  |  |  |  |
| *Provost/VP Approval* |  | *Date* |  |  |  |  |  |