



Please forward a hard copy of this completed form together with the organizational chart to the Executive Vice Dean for Finance & Administration within 30 days prior to commencing search for the position.

HIRING DEPARTMENT INFORMATION

Name Requestor: _____ Phone Extension (in case of questions): _____

Department #/Name: _____ Date: _____

POSITION INFORMATION

Position Title: _____ Projected Start Date: _____

New Position Replacement If Replacement, Name of Incumbent: _____

Days: **Monday to Friday** or select days: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Regular work hours: _____ to _____

Chart field to be charged: _____ / _____ / _____ / _____ / _____
Account Fund Organization Program Project

Employee Type: Code 100/110 Administrator Estimated Salary or range: \$ _____
 Code 104/114 Technical Support
 Code 106/116 Clerical Support

Primary Responsibilities: _____

Please explain why this position is needed and how it will improve the long-term functioning of your department:

REQUIREMENTS (Please indicate clearly what is required/desired)

Required Education: _____

Desired Education: _____

Desired skills, experience and knowledge: _____

RECRUITMENT AUTHORIZATION

1. Signature of Department Head _____ Date _____

2. Signature of Executive Vice Dean for Administration, Finance, Clinical & Student Services
_____ Date _____

3. Signature of Human Resources Officer _____ Date _____

4. Signature of Finance Officer _____ Date _____