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| **Auxiliaries Personnel Requisition/Posting Request Form**  **IMPORTANT:** *This form must be completed in its entirety and all applicable approvals must be*  *obtained before beginning any recruitment. This applies to all position requests.* | | | | | | | | | | | | | | | | | |
| Position Title: |  | | | | | | | | | | | Exempt  Classified  TH | | | | | |
| Replacement Position | | Job Description Attached | | | | | | Position Number: | | | | | | |  | | |
| Name of Employee Being Replaced: | | | | | | | | | | | | Termination Date: | | | |
| New Position | | Job Description to be Created | | | | | | Position Budget #: | | | | | | |  | | |
| Requirements and Duties Attached | | | | | | Expected Start Date: | | | | | | |  | | |
| Rationale for  posting request: | |  | | | | | | | | | | | | | | | |
| Department: | |  | | | | | | | | | | | | | | | |
| Hiring Supervisor Name: | |  | | | | Supervisor Title: | | | | | | |  | | | | |
| Supervisor Email Address: | |  | | | | Supervisor Phone Number: | | | | | | |  | | | | |
| Work Status: | | Full Time (40+ hrs per week) | | | | | | | | | | | | | | | |
| Part Time | | | | Approximately       hours per week | | | | | | | | | | | |
| Temporary Position | | | | Ending Date: | | | | | | | | | | | |
| Work Schedule: | | Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday  Start Time:       End Time: | | | | | | | | | | | | | | | |
| Compensation: | | $       per year | | $       per hour | | | | | | |  | | | | | |  |
| Driving Status: | | Will be required to drive UI vehicle  NA | | | | | | | | | | | | | | | |
| Advertising: | | Free Advertising Only | | | | | | | | | | | | | | | |
| Billable Advertising | | | Locations: | |  | | | | | | | | | | |
| Budget #: | |  | | | | | | | | | | |
| Closing Date of Posting: | | Closing Date:       (Exempt - 4 weeks minimum)  Closing Date:       (Classified - 2 weeks minimum)  Closing Date:       (TH - 3 days minimum) | | | | | | | | | | | | | | | |
| Additional Requirements: | | Resume and Cover Letter Required:  Yes  NA  Supplemental Questions for Application Attached:  Yes  NA | | | | | | | | | | | | | | | |
| Background Check  Budget #: | |  | | | | | | | | | | | | | | | |
| Search Committee  Members: | |  | | | | | | | Search Committee Chair Person: | | | | | | |  | |
| **APPROVAL**  ***This request will not be processed unless applicable signatures are present.*** | | | | | | | | | | | | | | | | | |
| **Hiring Supervisor Signature:** | | |  | | | | | | | **Date:** | |  | | | | | |
| **Director Signature:** | | |  | | | | | | | **Date:** | |  | | | | | |
| **Comments:** | | | | | | | | | | **Date Received by Aux Bus Svcs:**  **Date Position Posted:** | | | | | | | |