



TEMPORARY EMPLOYMENT REQUISITION

Revised 1/23/19

DEPARTMENT OF HUMAN RESOURCES

1) REASON FOR TEMPORARY NEED: Position Vacancy Leave of Absence Increase in Workload*

*If increase in workload: funding must be approved by the Dean/Department Head and transferred into the department's temporary budget.

2) POSITION CLASSIFICATION: Temporary Full-time Staff Temporary Part-time Staff - Hours Per Week: _____

3) HIRING INFORMATION

Department:	
Position Title:	NOTE – ASSIGNMENTS ARE NOT TO EXCEED SIX MONTHS.
Hourly Rate \$	Length of Assignment:
Assignment Start Date :	Assignment (Estimated) End Date:
Employee Being Replaced:	
Hiring Manager:	Ext:

4) ATTACH CURRENT JOB DESCRIPTION

Comments:

5) POSITION/BUDGET INFORMATION

Budget Department Name	Account Number	Object Code

6) DEPARTMENTAL INFORMATION

Requested by:	Date:	Ext:
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7) AUTHORIZATION SIGNATURE

Dean/Department Head Approval:	Date:
Sr. Vice President Approval:	Date:
Financial Affairs Review:	Date:
Human Resources Approval:	Date:

DATE RECEIVED IN HUMAN RESOURCES: _____ / _____ / _____