

Temporary Faculty & Staff Personnel Requisition and Hiring Approval

STEP 1: MUST BE FILLED OUT COMPLETELY BY PERSON INITIATING HIRING REQUEST

Submitted By: _____ Date: _____
(Printed Name and Title)

Position (being filled) _____ Department _____

Prospective Employee Name (if known): * _____

* ATTACH: 1) Resume/CV , 2) Official transcripts , 3) References (as required), 4) Department approval verification (faculty)

Position Details

- Existing position replacement for _____ due to:
(faculty/staff name)
resignation _____ retirement _____ extended sick leave _____ sabbatical _____ approved leave without pay _____
- Temporary faculty appointment due to unanticipated instruction needs _____

Anticipated appointment for: Fall _____ Spring _____ Summer 1 _____ Summer 2 _____ other _____

Workload: Full time _____ ¾ time _____ ½ time _____ ¼ time _____ other _____

Anticipated Employment Start Date: _____ Anticipated Employment Termination Date: _____

Bargaining Unit _____ Rank _____ Salary Range _____

Recommended Salary Rank and Step _____ (prorated based on teaching workload)

Chairperson/Manager Signature _____ Date _____

STEP 2: Dean's Approval

Dean/Director Signature _____ Date _____

STEP 3: MUST BE FILLED OUT BY HUMAN RESOURCES

- Resume Attached: (if needed) Yes _____ No _____ On file _____
- Official Transcript Received: (if needed) Yes _____ No _____ On file _____
- Letters of Recommendation: (if needed) Yes _____ No _____ On file _____
- Academic Department Approval: (if needed) Yes _____ No _____ On file _____
- Salary Proposed is consistent with CU Policies: Yes _____ NO _____ **Payroll Account Code** : _____
- Other considerations noted _____

Agreed to: _____ Date _____
(HR Director Signature)

STEP 4: MUST BE FILLED OUT BY GRANT MANAGER (IF APPLICABLE) AND BUDGET OFFICER

Operating Budget _____ Percentage _____ Grant _____ Percentage _____

Name of Grant _____ (if applicable)

Grant Manager's Signature _____ Date _____ Approved _____ (if applicable)

Budget Officer Signature _____ Date _____ Approved _____ (required)

STEP 5: Additional Signature(s) for Hiring Approval:

Vice President (or Provost) _____ Date _____

President (if applicable) _____ Date _____