Request to Hire Approval Form CLASSIFIED EMPLOYEES

College/Hiring Unit	Department		Date	
Our department would like to reques	st:			
Classified Permanent Hire (i.e. AFSCME, MAPE, MMA) New Position Description & Org Chart Existing		Classified Emergency/Temporary Hire for permanent employee on leave for additional help to replace existing employee due		
Position Description		to transfer, bid, or resignation		
Copy of resignation letter or retirement letter		Proposed dates of temp/emg employment** From to		
Job Classification	Name of Pe	erson Vacating Pos	ition	
Cost Center to be Charged				
Shift Day of Work _		Hours of Wo	ork to	
Reason Position Vacant: New position	on Retirement Tra	ansfer/Bid R	esignation Other*	
Please define other* or list any further information	ı:			
HR USE ONLY				
Position Control Number	Salary Min/l	to \$		
Signatures/Routing:	Recommen	ndation:		
Supervisor Signature	Date	Approved	Not Approved	
Dean/Director Signature	Date	Approved	Not Approved	
Vice President of Hiring Unit Signature	Date	Approved	Not Approved	
HR: Classified – Assistant Director	Date	Approved	Not Approved	
Budget Officer	Date	Approved	Not Approved	

** If requesting a temporary appointment extending beyond 12 months or conducting a search consult with Human Resources