

Staff Recruitment Request Form		Position ID #:	
Payroll Title/ Title Code:		New Position:	Replacement:
Working Title:		Replacement of:	
Department:		Will report to whom	l:
Was this position included in your budge	t? Y N	Appt Type:	
Justification:			
Advertising Needed:			
Search Committee Members:			
THE FOLLOWING THREE QUESTION			RACTOR POSITIONS ONLY:
1) Name of Independent Contracto	or, Vendor, or Te		
2) Start Date:		Est End Date: PO Ceiling Cap	
3) Hourly Rate: Total Investment/Budget: (Please	Total Est Hrs: complete below)	PO Cening Cap	5:
Year 1`Projected SalaryCBR %VAC AccrualBenefitsAdvertisingInterview TravelRelocationOne time set upTOTALS	Step 2: A where the is needed planning	QUIREMENT/ Step 1: is space ccess the link below and request new staff will be sitting. This is or not. https://medschoolintra Enter Building Location	t space or tell facilities REQUIRED whether space
CBR RATE effective of 07/0		COA: Entity/ Fund/ Activity/ Accoun Digits: (4) (5) (6) (6)	t/ Functn/ Program/ Project/ Flex1/ Flex (2) (3) (10) (10)
Staff Exempt- Full Benefits Staff Non Exempt- Full Benefits Staff- Partial Ben Eligibility Staff- No Benefit Eligibility	0.454 0.537 0.024 0.024	Additional COA if applicable	
Students- Graduate/Undergrad	0.024	Unit FAO/Budget Ow	ner will be responsible
VAC Leave Accrual	0.075	for ordering the follo	owing items:
Accruing Staff/Non-Faculty Academic	0.075	Computer Monitor	Telephone
		·	
Supervisor/ Hiring Manager	Date	Additional Monitor	Office Chair
FAO/ Finance Approval	Date	Senior Associate Dear	n/ Unit Head Date
Associate Dean/CFAO Finance & Administration	Date	HR Director	Date