

# Personnel Requisition Form

For Accounting Purposes Only

Dept Number: \_\_\_\_\_ Account Number: \_\_\_\_\_ Location: \_\_\_\_\_

**Staff Information**

This job is:  New  Replacement, last held by: \_\_\_\_\_

Position Budgeted:  Yes  No

Department: \_\_\_\_\_

FLSA Status:  Exempt  Nonexempt  Salaried  Hourly

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Updated Job Description:  Yes  No  
*(Attach Current Job Description and Justification for Position)*

Travel Required:  Yes  No

**Work Status:**

Regular Full-time  Partial Year Full-time  Regular Part-time  
 Partial Year Part-time  Temporary, anticipated duration shall be from \_\_\_\_\_  
to \_\_\_\_\_

If partial year, anticipated dates shall be from \_\_\_\_\_ to \_\_\_\_\_

**Work Schedule**

Hours per week: \_\_\_\_\_ Shift: \_\_\_\_\_ to \_\_\_\_\_

Sun	Mon	Tues	Wed	Thurs	Fri	Sat

*If part-time or irregular hours please indicate work schedule in boxes above*

Overtime work is:  Not applicable  Rare  Occasional  Frequent

**Salary/Wages:**

Range: Between \$\_\_\_\_\_ and \$\_\_\_\_\_  Hour  Annum

**Approval**

\_\_\_\_\_  
*Department/Division Head*      *Date*      *Sr. Administrator*      *Date*

\_\_\_\_\_  
*Chief Fiscal Officer*      *Date*      *President*      *Date*