



DEPARTMENT OF HUMAN RESOURCES

## NEW POSITION or POSITION RE-CLASSIFICATION REQUISITION FORM

Revised 04/08

<input type="checkbox"/> <b>NEW POSITION</b> (Complete this section and budget information below; attach proposed job description.)	
Department: _____	
Proposed Position Title: _____	
Recommended Annual Salary/ Hourly Rate: _____	Start Date: _____
Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> If part-time, hours worked per week: _____	
Director/Department Head Signature: _____	Dean Signature: _____
<b>Additional Requirements: Attach new job description; complete budget information below.</b>	
Comments: _____	

<input type="checkbox"/> <b>POSITION RE-CLASSIFICATION</b> (Complete this section and budget information; attach current and proposed job description; complete attached worksheet.)			
Department: _____		Position vacant? <input type="checkbox"/> Yes <input type="checkbox"/> No, Employee in position: _____	
Current Position Title: _____			
Current Annual Salary: _____	Current Grade Level: _____	<input type="checkbox"/> Exempt <input type="checkbox"/> Non-Exempt	
Recommended Title: _____		Recommended Salary Range: _____	
Reason for Re-classification: _____			
Director/Department Head Signature: _____		Dean Signature: _____	
<b>**BUDGET INFORMATION (For Re-Classification or New Position request)</b>			
	Budget Department Name	Account Number	Distribution %
<i>This year</i>	1)	1)	1)100
	2)	2)	2)
<i>On-going</i>	1)	1)	1)100
	2)	2)	2)

<b>FOR HUMAN RESOURCES USE ONLY:</b>		<b>Date Received in HR:</b> _____	
\$_____ Additional Benefit dollars to be taken from above accounts = 27% of new position or 7.65% of re-classification increase.			
Position Title: _____		CUPA # _____	
Grade: _____ <input type="checkbox"/> Exempt <input type="checkbox"/> Non-Exempt		Salary Range: _____ Effective Date: _____	
<b>Approved by:</b>			
_____		_____	
Human Resources Approval		Date	
_____		_____	
Vice President or Provost Approval		Date	