

**Request to Hire Form**  
Submit signed request form to Human Resources.

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Effective/Hire Date: \_\_\_\_\_ University ID Number: \_\_\_\_\_

Last Name \_\_\_\_\_ Legal First Name \_\_\_\_\_ Full Middle Name \_\_\_\_\_ Suffix \_\_\_\_\_

Job Title: \_\_\_\_\_ Department Name: \_\_\_\_\_

Office Location: \_\_\_\_\_ Phone Extension: \_\_\_\_\_

**Check all that apply:**

New Hire \_\_\_\_\_ Resignation \_\_\_\_\_ Pay Increase \_\_\_\_\_  
Promotion \_\_\_\_\_ Termination \_\_\_\_\_ Rehire \_\_\_\_\_  
Transfer \_\_\_\_\_ Other, explain: \_\_\_\_\_

**Type of Position:**

- Full-time Faculty 9-month \_\_\_\_ 12-month \_\_\_\_  
 Adjunct Faculty  
 Full-time Staff  
 Part-time Staff, No. of hrs. /wk. \_\_\_\_\_  
 Temporary, ending date \_\_\_\_\_
- Student Worker - No. of hrs. /wk. \_\_\_\_\_  
*Max. 20 hrs. /wk. during academic year. Max. 29 hrs. /wk. during summer.*  
Last Term Worked \_\_\_\_\_ \$10.10 is mandatory pay rate for all  
**new** student employees. Returning  
students may retain previous pay rate.

**Work Study Award:** \$ \_\_\_\_\_

Pay Status:  Salaried/Exempt  Hourly/Non-exempt

Pay Rate: \_\_\_\_\_ *If salaried, indicate monthly wage. If hourly, indicate hourly wage.*

If change, former rate: \_\_\_\_\_ **Note: An increase in the rate of pay requires additional approval.**

Is position new?  Yes  No Is position in current budget?  Yes  No

If replacement, name of previous employee & date of termination: \_\_\_\_\_

Supervisor (Interviewer) Name/Ext: \_\_\_\_\_

Contingent Timesheet Approver: \_\_\_\_\_

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**(To be completed by Supervisor)**

Position Number: \_\_\_\_\_ GL Number: \_\_\_\_\_

Position Number: \_\_\_\_\_ GL Number: \_\_\_\_\_

*(Use 2<sup>nd</sup> position line and GL # if position is split between 2 depts.)*

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**Signature Requirements:**

**Student Worker positions require both the Hiring Supervisor AND his/her Supervisor's signature.  
All other positions require the Dean (if applicable) AND the appropriate VP's signature.**

Supervisor/Dept. Head/Date: \_\_\_\_\_ Supervisor/Date: \_\_\_\_\_

Dean/Date: \_\_\_\_\_ Department VP/Date: \_\_\_\_\_

Payroll or Controller/Date: \_\_\_\_\_

VP Fin. & Admin. /Date: \_\_\_\_\_