



APPROVAL TO RECRUIT FORM

All information must be provided

POSITION IS:

- ☐ New
☐ Replacement
☐ Temporary (If temporary, duration of employment)_____

Current/Former Incumbent:_____ Effective Date of Vacancy:_____

Desired Start Date:_____ Hiring Supervisor(s):_____

If temp; End date:_____ Extension:_____

POSITION INFORMATION: (Please complete all information requested below)

Job Title:_____ Pay Range (No. or letter): _____

Department Name(s):_____ Administrator ☐ Support Staff ☐

☐ Full Time ☐ Part-time FTE:_____

Cost Center(s) No(s):_____ Hrs/wk:_____ Months/year:_____

If less than 12, which months?_____

Account No(s):_____ Daily: From _____ a.m./p.m. To _____ a.m./p.m.

Location:_____ Days/week: ☐ Mon-Fri Other:_____

Position within budget? ☐ Yes ☐ If not, request funding?

JOB DUTIES: (Complete job description must be attached. Please contact HR if a template is needed. Summary of duties may be attached if for a temporary position.)

RECRUITMENT DESIRED: ☐ Internal Only ☐ GF Website ☐ Newspaper Ad(s)_____

☐ CCCU Website ☐ Craigslist.org ☐ higheredjobs.com ☐ Other:_____

APPROVAL SIGNATURES (in order listed): *PLEASE DATE YOUR SIGNATURE.*

1. Originator:_____ Date:_____
2. 2nd Level (if any):_____ Date:_____
3. Area VP/Provost:_____ Date:_____
4. Director of HR:_____ Date:_____
5. VP of Finance:_____ Date:_____

HIRING INFORMATION: (Complete this section only after selecting a candidate, but before making offer of employment.)

Proposed Start Date:_____ Proposed Salary:_____

Candidate Selected:_____

APPROVAL SIGNATURES REQUIRED (In order listed): *PLEASE DATE YOUR SIGNATURE.* (Only Originator and HR Director signatures needed for temporary hires in this section.)

1. Originator:_____ Date:_____
2. 2nd Level (if any):_____ Date:_____
3. Area VP/Provost:_____ Date:_____
4. Director of HR:_____ Date:_____
5. VP of Finance:_____ Date:_____

HR USE ONLY: IPEDS Code:_____ Position No.:_____

Copies: Human Resources Supervisor 2nd Level Supervisor Supervising Vice President