

1 - Transaction type. Check only one transaction type. All applicable sections must be completed.

<input type="checkbox"/> New position	<input type="checkbox"/> Fill a vacant position.	<input type="checkbox"/> Promotion.	Name:
<input type="checkbox"/> Reclassification Name:			EMPL ID:
<input type="checkbox"/> Reappointment/Reinstatement Name:			EMPL ID:

2 - Position Information.

Department:		Department Code / ID:	
Preparer Name:		Phone:	
Position Title:		Job Code:	Benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No
Position #(s):		Salary Plan/ Range of Pay:	# Needed:
Return To Department - Name:		Campus:	Building: Room:

3 - Human Resources/Budget Information.

Budgeted: <input type="checkbox"/> Y <input type="checkbox"/> N		Type: <input type="checkbox"/> 9mo <input type="checkbox"/> 12mo		Type: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary	
Norman – Dept. # OR HSC Account #	Source of Funding (HSC only)	%FTE	Norman - Account code OR HSC - GL Account		
Fill in anticipated annual cost. Is the anticipated salary cost in excess of previously budgeted amount? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Current position costs: Salary \$		+ Cost of fringe benefit \$		= Total compensation \$	
Anticipated position costs: Salary \$		+ Cost of fringe benefit \$		= Total compensation \$	

4 - REQUIRED - Justification. Check all appropriate reasons.

<input type="checkbox"/> Critical to public safety.	<input type="checkbox"/> Critical to life sustaining health services.
<input type="checkbox"/> Critical to protection of public property.	<input type="checkbox"/> Critical to continuation of agency services (university mission).

Detailed justification of critical need(s) checked above and any increased salary. Explanation required of source for any increase in salary:

5 - Required Signatures.

	Date	Phone Number
Person responsible for hiring:		
Department Head:		
Dean:		
VP/ Provost:		
President:		

HR Use Only	Comments:	Initials:
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