



**Conditional Hire / Title and Salary Request**

**(To be used for new hires that have not been cleared to work through Human Resources)**

Date: \_\_\_\_\_

Name of Participant: \_\_\_\_\_

Contact Email for Participant or Designee: \_\_\_\_\_

Contact Phone Number for Participant or Designee: \_\_\_\_\_

\_\_\_\_\_  
Name of Conditional Hire: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

\* Conditional hire does not guarantee candidate's hire, it allows Independent Support Services to process their application and other necessary forms as required and perform all state mandated background checks. Once background checks and necessary forms are completed and reviewed the candidate and participant or designee will be contacted with approval to hire.

\_\_\_\_\_  
If approved what position/ title will candidate have: \_\_\_\_\_

If approved what salary will candidate start at: \_\_\_\_\_

\_\_\_\_\_  
Signature of Participant or Designee/ Date

\* This form can be faxed to 845-794-8168 or 631-532-1633 or you can email the form or the information requested in an email to [hr@issny.org](mailto:hr@issny.org)

\_\_\_\_\_  
For HR use only

Date received: \_\_\_\_\_

Date entered into payroll system: \_\_\_\_\_