Extension Request to Fill Position (University Park Positions)

Obtain all Department signatures before submitting to Administrative Services for approval

Unit Name:	Position Title:	
Working Title:	Number of positions: _	
Type of Request: New Position OR Replacement Position - Position	tion formerly held by:	
Employee Type: Staff Administrator Student	t	
Position Type: No Term Term Wage	Fixed Term Multi	-Year
 If FT1, the possibility of re-funding: Good Excellent If Reduced Schedule, positions range from 75% to 99% (FTE) annually Number of Hours Per Week - Days of the Week 		
Background Checks: Authorized Adult per Policy AD39 MVR	Check Credit Check	License Verification
Request for Flexible Work Arrangement: 100% Remote Work (occasion)	onal on-site) Hybrid	Alternative Start & End Time
Recommended Salary Range: \$	Maximum Hiring Amo	ount: \$
Home Budget Fund	_	
Pay Budget: <u>Simba: 2120100090</u> Fund Name: <u>College Clearing A</u>	<u>account</u>	Funding Vonified.
Department Budget Distribution Simba IO:%	Project #	Funding Verified:
Department Budget Distribution Simba IO:%	Project #	
Signature Appro	vals	
Supervisor Print Name: Signature:		
Unit Leader Print Name: Signature:		
2 nd Unit Leader		Date
Print Name: Signature:		Date
Office of Administrative Services:	Date	Requisition Number
Dean's Office:	Date	_