

SECTION 7 – Justification

*****Detailed explanation of action (required):** Please provide a SPECIFIC EXPLANATION FOR personnel/position action and qualifications and educations.

SECTION 8 – Signatures for Approval

Name of Person who Prepared Requisition: (if different from Hiring Administrator) _____

Phone Ext: _____

2) _____ /_____/_____
Vice President’s Signature Date

Hiring Administrator: _____
Print Name

1) _____ /_____/_____
Hiring Dean/Administrator’s Signature Date

3) _____ /_____/_____
President’s/Vice Chancellor Signature Date

Phone Extension: _____

FOR SIGNATURES AND OFFICE USE ONLY

FOR LABOR DISTRIBUTION CHANGES ONLY

***VP of Administrative Services Signature:** _____ Date: ____/____/____

***Director of Business Services Signature:** _____ Date: ____/____/____

FOR HUMAN RESOURCE SERVICES ONLY

1) _____ /_____/_____
Human Resource Services Analyst Review Date

Item Number Presented to Board _____ **Date of Board Approval** ____/____/____ **Completed:** I-9 Fingerprints

2) _____ /_____/_____
Director, Human Resource Services Signature Date

HR: Inputted by: _____ Date: ____/____/____ **Payroll:** Inputted by: _____ Date: ____/____/____ **Benefits:** Inputted by: _____ Date: ____/____/____