



HUMAN RESOURCES TEMPORARY VACANCY REQUEST FORM

Human Resources Use Only
Position Control# _____
Salary _____

1. POSITION INFORMATION

Position Title _____ Applicant Name: _____
The position is New Existing: replacing whom? _____
Division _____ Section _____ Program _____
Worksite Choose one . . . Work Phone # _____
Hours: Full-time Part-time: Number of hours per week _____ Hourly Rate: _____
Work Days: Monday – Friday Other _____
Work Schedule: Winter Hours: From _____ To _____ Summer Hours: From _____ To _____ Hours Vary
Will employee rotate shifts? Yes: how often? _____ No
This position requires a commercial driver’s license: Yes No

2. BUDGET INFORMATION

This position is budgeted: Yes No: (if no, submit a Personnel Change Request form before routing this VRF)
The full-time equivalent (FTE) included in the budget is _____

Account Number:	Fund _____	Division _____	Program _____	CAFR _____	Description _____	Percentage _____
(old Naviline format)	Fund _____	Division _____	Program _____	CAFR _____	Description _____	Percentage _____
	Fund _____	Division _____	Program _____	CAFR _____	Description _____	Percentage _____
	Fund _____	Division _____	Program _____	CAFR _____	Description _____	Percentage _____
	Fund _____	Division _____	Program _____	CAFR _____	Description _____	Percentage _____

This position is temporary: Yes No

Duration of temporary position: Start Date _____ End Date _____ Please select one of the options below:
 This temporary position will work less than 19.75 hours per week
 This temporary position will work more than 19.75 hours per week.

3. REQUESTOR INFORMATION

Name of hiring supervisor: _____ Phone Number: _____

4. APPROVALS

1. _____ Date _____ 2. _____ Date _____
Section Head Division Director
3. _____ Date _____
Human Resources