UCI Division of Finance and Administration
With U • For U

Staff Recruitment Request Form

Department Name: _____ Hiring Manager: _____

# of Positions: ☐ Position Type: Unknown Position Status: ☐ *New* ☐ *Replacement* ☐ *Contract Renewal*

If replacement or contract renewal, name of previous/current employee: _____

If Student or Limited, indicate the anticipated duration of employment: _____

If recruitment is needed, select one: ☐ *Internal Recruitment* ☐ *External Recruitment*

Working Title: _____ Proposed Salary/Increase: _____

1.) Provide a ***short*** summary of the position.

2.) What is the impact on the department if the position is not filled?

3.) Is this position funded, and how? If known please provide account, fund, and sub or KFS account.

4.) If existing position, when did the previous employee leave this position, and has the position Job Description changed?

_____ _____

Authorization - Department Head Date

Please submit this form to ABSHR@uci.edu with appropriate signatures and a copy of the job description. We may request a soft copy of the Job Description for classification purposes.

FOR DFA HR USE

Payroll Title Code: _____ Payroll Title Name: _____ Position Type: _____

Comp Range, Min-Mid: _____ Approved Salary/Range: _____

Renewal year if applicable: ☐ New ☐ 2nd year ☐ 3rd year ☐ 4th year ☐ 5th year

Funding: Account/Fund/Sub _____ /_____ /_____ KFS _____ Position #: _____