FACULTY AND UNCLASSIFIED PERSONNEL
RECRUITMENT REQUEST

Academic Department _____

Job Title: _____
(Professor, Associate, Assistant, Instructor, Visiting)

Specialty Sought: _____

Teaching responsibilities: _____ No. contact hours per semester

Names of Courses to be taught:

_____ _____

_____ _____

Start Date: _____

Chair's Justification for request: Please check one of the following:

____ New line _____ Line Previously Held By _____

SALARY REQUESTED: $_____

- -

Submitted by:

1. _____ _____
Department Chair or Program Director Date

2. _____ _____
Division Head and/or Dean of School Date

3. _____ _____
Provost Date

4. State supported position # _____ is or will be available to make this appointment.

_____ _____
Director of Budgets Date

5. Permission is granted for Provost to authorize and oversee recruitment and screening procedure.

_____ _____
President Date

**Return this form to Provost's Office after all signatures are received.*