New Position Request Form

Contact Information

Requester: Click here to enter Name.
Title: Click here to enter Title.
Phone Number: Click here to enter Phone Number.
E-Mail: Click here to enter E-mail.
Date Requested: Click here to enter a date.

Position Information

Staff Position Title: Choose an item.
Faculty Rank Title: Choose title for Faculty only.

Is the purpose of this request to refill or reclassify a position as a result of a VERP vacancy? Choose an item. If yes, please explain. Click here to enter text.

If Express Classified, name and Banner ID of one other incumbent (or if vacant, previous incumbent) in same position title within your department: Click here to enter text.

Position type: ☐ Single ☐ Pooled
Position status: ☐ Full-time ☐ Part-time ☐ Temporary ☐ Student
Time Reporting Method: ☐ Web ☐ Time clock ☐ Departmental
Position requires an EPAF: ☐ Yes ☐ No
UMG Faculty position: ☐ Yes ☐ No

Timekeeping Location: Enter Dept. #.
Organization: Enter Dept. #. Position Reports to: Enter position #
Position Budget: Enter budget.

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<th>Fund</th>
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<th>Organization</th>
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Completed by HR Compensation:

PAB #: _____ (For new staff positions only)
Position Number: _____
Salary Grade: _____
Exempt/Non-Exempt: _____
Employee Class: _____
Position Class Code: _____
Salary Table: _____
Extra Notes: _____
Position Labor Distribution