



# University Corporation at Monterey Bay

## REQUEST TO RECRUIT

**Job #: FP201\_\_ - \_\_\_\_\_**

Complete Section I, attach proposed Job Description (please e-mail electronic copy to Gehane Kiama), & organizational Chart, route for signatures as indicated in Section II, forward to Human Resources, Ryan Ranch. If position is grant funded, please forward to Sponsored Programs Office\*, Bldg. 97.

### SECTION I - TO BE COMPLETED BY HIRING DEPARTMENT

1. Date of Request:	2. Department(s):	3. Unit- Account - Fund - DeptID - Class - Proj/Grt - % <small>(DevAccounts)*</small>					
		MB075 -	-	-	-	-	= %
		MB075 -	-	-	-	-	= %
	4. Proposed Working Title:	MB075 -	-	-	-	-	= %
5. Person to Contact:		Phone #	6. Dean / Director:				Phone #
7. Manager / Supervisor:		Phone #	8. Manager's / Supervisor's Title:				
9. Benefits Information <input type="checkbox"/> Benefited <input type="checkbox"/> Non-Benefited		10. Time Base: Hrs/wk: _____ %		11. Reason for Request (Check one applicable category): <input type="checkbox"/> Replacement <input type="checkbox"/> New Position <input type="checkbox"/> Leave of Absence			
12. # of Vacancies	13. Hrs/Day (e. g., 8 - 5):		14. Days/Wk (e. g., M - F):				
15. Previous Incumbent (If applicable):			16. Dates of Assignment (e. g., 9/25/16 – 6/30/17.):				
17. Paid Advertising Requests: (Check all that applies) <input type="checkbox"/> MontereyBayJobs.com <input type="checkbox"/> Craigslist.org <input type="checkbox"/> Chronicle of Higher Ed <input type="checkbox"/> Diversityjobs.com <input type="checkbox"/> Monterey Herald <input type="checkbox"/> Other: _____						18. Advertising Account – (If same as #3, leave blank)  Please Note: Recruitments are automatically posted to free websites, i.e., CSUMB web, CaJobs, CSU Careers, etc.	

### SECTION II - SIGNATURE APPROVALS (Please route according to number)

1. Manager / PI Signature:		Date:	2. VP or College Dean's Signature		Date:
Amount Budgeted: (If applicable) \$	Target Hiring Salary (To be used on announcement) \$	Date Available:	3. Executive Director, University Corporation of CSUMB: (for non-grant funding)		

**AND (if applicable; if NOT, send directly to University Corporation HR)\*:**

4. Director, Sponsored Programs Office Review and Signature:		Date:
Amount Budgeted: \$	Date Available:	
Notes:		

### SECTION III – UNIVERSITY CORPORATION HR USE ONLY

1. Working Title:		2. Classification:	
3. Signature of Reviewer(s):			Date(s):