



CENTRAL LOUISIANA TECHNICAL COMMUNITY COLLEGE

Employee Requisition Form

POSITION INFORMATION			
Type		Position Title	
<input type="checkbox"/> NEW	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time % _____	
<input type="checkbox"/> REPLACEMENT			
<input type="checkbox"/> 9-MONTH			
Employment Period		<input type="checkbox"/> Temporary/Adjunct From To	Requested Start Date ASAP
<input type="checkbox"/> 12 Month	<input type="checkbox"/> Full Time		
<input type="checkbox"/> Other _____			

REPLACEMENT INFORMATION (If Applicable)			
Name of Person Being Replaced, Job Title and Work Location			
<input type="checkbox"/> Resigned	<input type="checkbox"/> Retired	<input type="checkbox"/> New Position	<input type="checkbox"/> Termination
<input type="checkbox"/> Other _____			

BUDGET INFORMATION						
Budget/Grant Title	Budget Number(s) and Percentage					Funding End Date
	FUND	ORGN	ACCT	PROG	%	
	_____	_____	_____	_____	_____	
	_____	_____	_____	_____	_____	
	_____	_____	_____	_____	_____	

Position Compensation Range (HR has this data)

PLEASE ATTACH CURRENT JOB DESCRIPTION (Contact Human Resources Department for Assistance)

REQUESTED BY			
Signature	Date	Telephone#	Department

APPROVAL SIGNATURES			
_____ (1) Hiring Supervisor	_____ Date	_____ (3) Vice Chancellor of Finance	_____ Date
_____ (2) Human Resources Director	_____ Date	_____ (4) Chancellor	_____ Date