



Town of Sherborn (Eff. 7/1/16) PERSONNEL REQUISITION

This form should be completed when a position needs to be filled. Purpose is to ensure that adequate funding is available and/or that all relevant factors are considered prior to the opening of a search. All signatures must be secured before a search may be opened.

Date: _____ Job Title: _____

Employment Status: FT _____ PT _____ Temp or Seasonal _____

Department: _____ Position reports to: _____

Budget Account number that position will be charged to: _____

Classification: _____ Date Position is Needed: _____

If temp or seasonal, dates: from _____ to _____ (For seasonal max is 15 wks)

_____ Attach a current copy of the job description, and a marked up version if requesting to update the existing job description. Be sure to review the job description for changes to experience, education, qualifications (e.g., licenses, experience, training, etc.).

_____ Attach a draft position announcement/advertisement and list the best places to post or advertise the position.

Is this a Staff addition _____ or replacement _____? Other? Explain on separate sheet.

Is this position budgeted in the current fiscal year? Y or N FY_____

What is the budgeted maximum hourly rate? \$ _____/hr Annual Salary: \$ _____/yr

What are the estimated ancillary budget impacts:

CATEGORY	AMOUNT	CATEGORY	AMOUNT
Training	\$	Educational Pay	\$
Clothing	\$	Office Equipment	\$
Medical Benefits	\$	Other:	\$
Stipends	\$	Other:	\$

Staff Replacement Only

If a replacement, name of employee being replaced: _____

Date employee is expected to leave: _____ Requests exit interview? Y or N

If temp or seasonal, date regular employee is expected to return: _____

Required Signoffs _____ N/A

Dept. Head Signature: _____ Date _____

Town Administrator / HR: _____ Date _____

Finance/Payroll : _____ Date _____

Notes: _____

