**AUTHORIZATION FOR TEMPORARY HIRE  
*Please complete this form to request authorization to waive a recruitment and hire a temporary position with no expectation of continuation and a candidate has already been chosen.***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **POSITION INFORMATION** | | | | | | |
| Date: |  | | | | | |
| Budget position number:  *(if applicable)* |  | | | | | |
| Fund / Dept / Program code: |  | | | | | |
| Use for background check fee |  | If different, provide account: | | |  | |
| UW System title: |  | | | | | |
| Working title if different: |  | | | | | |
| Access to minors/medical patients?: [[1]](#endnote-1)🛈 |  | | | | | |
| Department name: |  | | | | | |
| Campus mailing address: |  | | | | | |
| Position type: |  | | | | | |
| FTE%: *(if applicable)* |  | | | | | |
| Start Date: |  | | | End Date: |  | |
| Appointment basis: |  | | | | | |
| Proposed salary or range (100%): |  | | | | | |
| New or replacement position: |  | | | | | |
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|  | | | | | | |
| **IF REPLACEMENT POSITION, COMPLETE REGARDING FORMER/CURRENT INCUMBENT** | | | | | | |
| Name: |  | | | | | |
| Salary: |  | | | | | |
| Percent of appointment: |  | | | | | |
| UW System title: |  | | | | | |
| Working title if different: |  | | | | | |
|  | | | | | | |
|  | | | | | | |
| **CANDIDATE INFORMATION** | | | | | | |
| Name: |  | | | | | |
| E-mail Address |  | | | | | |
| Situation: |  | | | | | |
| Justification/Rationale |  | | | | | |
|  | | | | | | |
| **IF A REHIRED ANNUITANT IS BEING HIRED (rehire of a retired WRS Employee)** | | | | | | |
| Please e-mail this form to [PayrollandBenefits@uwgb.edu](mailto:PayrollandBenefits@uwgb.edu) to verify waiting period has been met. This form will be returned to you after verification to continue with the approval process below. | | | | | | |
| Break in Service Date met on: |  | | Required WRS Participation: | | |  |
| Payroll and Benefits Signature: |  | | | | | |

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| **AUTHORIZATION** | | | |
| REQUIRED ATTACHMENTS FOR ALL TEMPORARY HIRES: | | | |
|  | Department Organizational Chart | | |
|  | Position Description (if applicable – not for Associate Lecturers, Ad Hoc Program Specialists, etc.) | | |
| ADDITIONAL REQUIRED ATTACHMENTS FOR FACULTY, ACADEMIC STAFF, AND LIMITED HIRES GREATER THAN 50% FTE: | | | |
|  | Approved page from the Post Merit Budget Worksheet (from budgsub$ drive) | | |
|  | Current Vitae or Resume (if not already on file) | | |
|  | Unofficial transcripts of highest degree earned (if not already on file) | | |
|  | | | |
|  | |  |  |
| *Department Chair/Supervisor* | |  | *Date* |
|  | |  |  |
| *Dean/Division Head/Director in Business and Finance* | |  | *Date* |
|  | |  |  |
| *Area Leader* | |  | *Date* |
|  | |  |  |
| *Position Review Committee Chair* | |  | *Date* |
|  | | | |
|  | | | |
| **ROUTING** | | | |
| **Authorization for Recruitment** | | | |
| Department chair/supervisor (Electronic) ↓  Dean/division head/director (Electronic) cc: [hr@uwgb.edu](mailto:hr@uwgb.edu) ↓  Area leader - c/o admin. asst. (Electronic or Hard copy)↓ | | | |
| Human Resources ↓  Position Review Committee (PRC)  *PRC meets weekly on Tuesday morning. Forms received in HR after noon on Friday are not guaranteed review at the following weeks’ PRC meeting.* | | | |

1. Access to vulnerable populations – Responsibilities require unsupervised or significant access to vulnerable populations, defined as minors and medical patients. For purposes of this policy, a minor is a person under the age of eighteen (18) who is not enrolled or accepted for enrollment at a UW System institution. Examples of settings with vulnerable populations include child care centers, summer camps for minors, precollege or enrichment programs, and health care facilities. This category also includes employees who are not directly working in those units, but have unsupervised access to the unit when the vulnerable population present. [↑](#endnote-ref-1)