**AUTHORIZATION TO WAIVE RECRUITMENT  
*Please complete this form to request authorization to waive a recruitment for part/full time hires where the expectation is that the contract will be renewed assuming satisfactory performance.***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **POSITION INFORMATION** | | | | |
| Date: |  | | | |
| Budget position number: |  | | | |
| 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%: |  | | | |
| Start Date: |  | | End Date: |  |
| Appointment basis: |  | | | |
| Proposed salary or range (100%): |  | | | |
| New or replacement position: |  | | | |
|  | | | | |
|  | | | | |
| **IF REPLACEMENT POSITION, COMPLETE REGARDING FORMER/CURRENT INCUMBENT** | | | | |
| Name: |  | | | |
| Salary: |  | | | |
| Percent of appointment: |  | | | |
| UW System title: |  | | | |
| Working title if different: |  | | | |
|  | | | | |
|  | | | | |
| **CANDIDATE INFORMATION** | | | | |
| Name: |  | | | |
| Situation: |  | | | |
| Justification/Rationale |  | | | |
|  | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **AUTHORIZATION** | | | |
| REQUIRED ATTACHMENTS: | | | |
|  | Department Organizational Chart | | |
|  | Approved page from the Post Merit Budget Worksheet (from budgsub$ drive) | | |
|  | Position Description | | |
|  | Current Vitae or Resume | | |
|  | Certified 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* |
|  | |  |  |
| *Chancellor* | |  | *Date* |
|  | | | |  | *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. category also includes employees who are not directly working in those units, but have unsupervised access to the unit when the vulnerable population is present. [↑](#endnote-ref-1)