



POSITION REQUEST FORM

POSITION INFORMATION

Effective Date

JOB INFORMATION

Business Unit

Job Code

Reg/Temp

Official Title

Standard Hours

Full/Part Time

WORK LOCATION

Department ID

Department Description

Reports To (Position Number)

Campus Location

Reports To (Name)

Reports To (EMPLID)

PAYGROUP INFORMATION

Pay Group

Employee Type

Combo Code (Speed Type)

Submitted by

Position Number

Date Submitted

Created by

Creation Date

fd 080218

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