# EOC logo identifier.JPG

**REQUEST TO HIRE STAFF**

### PLEASE PRINT OR TYPE

|  |  |
| --- | --- |
| Date: |  |
| Requested By: |  |
| Permanent / Temporary: |  |
| RF (Grant #): |  |
| Employee Name: |  |
| Title: |  |
| Start Date: |  |
| End Date: |  |
| Total # of weeks: |  |
| Total Hours per week: |  |
| Suggested Salary: | $ |
| Supervisor: |  |
| Type of Appointment: | Full Time Part Time |
| Justification: | |
|  | |
|  | |
|  | |
|  | |

**Signature of Initiator**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPROVAL SIGNATURES**

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| --- |
| Supervisor Signature & Date: |
| Assoc. Dir. / Dir. of Education Signature & Date: |
| Admin. Services Director Signature & Date: |
| Executive Director’s Signature : |
| Admin. Services Sr. Staff Asst. Signature & Date: |

### AVAILABILTY OF FUNDS YES NO FUND SOURCE \_\_\_\_\_\_\_\_\_\_\_\_\_\_ ACCOUNT # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REQUEST APPROVED YES NO**

|  |
| --- |
| Reason: |
|  |
|  |