

COLLEGE OF MICRONESIA-FSM

**PERSONNEL REQUISITION**

INSTRUCTIONS: The first part of this form should be completed by the supervisor. No action is to be taken before the Vice President authorizes filling this position.

JOB TITLE		DEPARTMENT		SUPERVISOR/REQUESTOR	
WORKING JOB TITLE (if different)		CAMPUS (if applicable)		CO-SUPERVISOR (if applicable)	
WORK STATUS <input type="checkbox"/> Regular full-time <input type="checkbox"/> Other (specify)		CATEGORY <input type="checkbox"/> Classified <input type="checkbox"/> Professional <input type="checkbox"/> Faculty <input type="checkbox"/> Managerial <input type="checkbox"/> Exempt		ACCOUNT NUMBER(S) TO BE CHARGED	
<input type="checkbox"/> New Position <input type="checkbox"/> Replacement				POSITION NEEDED BY	
JUSTIFICATION FOR FILLING NEW OR VACANT POSITION					
POSITION DUTIES AND RESPONSIBILITIES (List what is expected of the position)					
QUALIFICATIONS		REQUIRED(minimum)		PREFERRED	
EDUCATION					
EXPERIENCE					
ABILITY AND KNOWLEGE					
<b>APPROVING AUTHORITIES</b>					
CAMPUS DIRECTOR [If applicable]			DATE RECIEVED/SIGNED		
VICE PRESIDENT(VPA/VPSSA/VPCRE/VPIA)			DATE RECEIVED/SIGNED		
COMPROLLER			DATE RECEIVED/SIGNED		
<b>FOR HUMAN RESOURCES USE ONLY</b>					
JOB CLASSIFICATION		PAY LEVEL	STEP	SALARY RANGE	
EO NUMBER		OPENING DATE		CLOSING DATE	
HUMAN RESOURCES DIRECTOR			DATE RECEIVED/SIGNED		