

Position Request Form
Kentucky Wesleyan College

POSITION INFORMATION

Purpose of the request is to: Rehire/renew an existing position Change an existing position
 Rehire/renew an existing position with changes Establish a new position

Position Title: _____

Department: _____

Position type: Regular Temporary Volunteer

Position status: Faculty Administrative staff Support staff Volunteer

Hours per week: Full-time Part-time – indicate approximate hours per week
 21 – 29
 11 – 20
 1 – 10
 Varies or unknown

Begin date: _____ End date: _____
(indicate "on-going" if no scheduled end date)

Months per year: _____
(indicate a number of months or a time period, e.g., January – May)

Wage range: \$_____ to \$_____ per hour month semester season year

Department account number: _____

Other information: _____

ADVERTISING INFORMATION

Websites: _____

Newspapers: _____

Other: _____

SIGNATURES

Position Supervisor: Approved Not Approved _____ Date: _____

Cabinet Officer: Approved Not Approved _____ Date: _____

VP of Finance: Approved Not Approved _____ Date: _____

College President: Approved Not Approved _____ Date: _____