

Staff Recruitment Request Form

Position ID #: _____

Payroll Title/
Title Code: _____

New Position: _____ Replacement: _____

Working Title: _____

Replacement of: _____

Department: _____

Will report to whom: _____

Was this position included in your budget? **Y** **N**

Appt Type: _____

Justification: _____

Advertising Needed: _____

Search Committee Members: _____

THE FOLLOWING THREE QUESTIONS ARE FOR TEMPORARY/ INDEPENDENT CONTRACTOR POSITIONS ONLY:

1) Name of Independent Contractor, Vendor, or Temp Agency: _____

2) Start Date: _____ Est End Date: _____

3) Hourly Rate: _____ Total Est Hrs: _____ PO Ceiling Cap: _____

Total Investment/Budget: (Please complete below)

	Year 1`
Projected Salary	
CBR %	
VAC Accrual	
Benefits	
Advertising	
Interview Travel	
Relocation	
One time set up	
TOTALS	

Is space needed? **YES** **NO**

If Yes: request space here:

<https://medschoolintranet.ucr.edu/space-planning>

Required: Enter Building Location

Additional comments:

COA: Entity/ Fund/ Activity/ Account/ Functn/ Program/ Project/ Flex1/ Flex2
 Digits: (4) (5) (6) (6) (2) (3) (10) (10)

Additional COA if applicable

CBR RATE as of 07/01/23	
Staff Exempt- Full Benefits	0.431
Staff Non Exempt- Full Benefits	0.52
Staff- Partial Ben Eligibility	0.018
Staff- No Benefit Eligibility	0.018
Students- Graduate/Undergrad	0.018
VAC Leave Accrual	
Accruing Staff/Non-Faculty Academic	0.0700

Unit FAO/Budget Owner will be responsible for ordering the following items:

- Computer Monitor Telephone
- Additional Monitor Office Chair

Supervisor/ Hiring Manager Date

FAO/ Finance Approval Date

Associate Dean/CFAO Date
Finance & Administration

Senior Associate Dean/ Unit Head Date

HR Director Date