



This form is to be used to notify the Department of Human Resources of all new or replacement positions. It is not intended to replace the PC05, MOA or any existing documents.

PERSONNEL REQUISITION

Mississippi Valley State University

SECTION 1: GENERAL INFORMATION (Please type or print)

Position Title: _____ Department: _____

Name of Hiring Official: _____ Ext. _____ Email Address: _____

SECTION 2: REASON FOR REQUISITION

Reason for Vacancy: (Check One) Replacement New Position Former Incumbent's Name: _____

Projected Last Date Worked: _____ Actual Last Date Worked: _____

SECTION 3: BUDGET INFORMATION (To be completed by the Office of Title III / Sponsored Programs, if grant funded)

Fund Number: _____ Banner Org. Number: _____

FLSA Status: _____ Salary Range: _____ to _____ Institutional Funded (10)
(Exempt, Non-Exempt Salaried, Non-Exempt Hourly) Grant Funded (30)

Position Status: (Check One) 12-month 11-month 10-month 9-month Other

SECTION 4: TYPE OF POSITION/SCHEDULE

Work Schedule: Full Time Part Time Temporary Scheduled # of hours per week: _____

Classification: Faculty Staff Student Contractual

SECTION 5: POSTING

Job Posting Preference: Internal (MVSU Website, MS Employment Service) External (Include vendor(s) and Purchase Order # below)

Requested Advertising Vendors: _____

Check here for internal applicants only
All regular full and part time positions will be posted internally on our MVSU website for a minimum of 5 calendar days. Attach job description

SECTION 6: APPROVALS (Requisitions should be signed by the department head and Area Vice President, then forwarded directly to the Office of Business and Finance and lastly to the Office of Human Resources, unless grant-funded. All grant-funded positions should be sent to the Office of Title III / Sponsored Programs)

_____	_____/_____/_____	_____	_____/_____/_____
Department Head	Date	Area Vice President	Date
_____	_____/_____/_____	_____	_____/_____/_____
Office of Business and Finance	Date	Office of Sponsored Programs, Title III, Private Grants	Date
_____	_____/_____/_____	(Only if grant funded)	
Office of Human Resources	Date		