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| **MSU Extension Position Request Form**  For Academic, Non-Academic & Support positions | | | | | | | | | | | | | | | | | | | | | | | | | |
| * This form is to ensure all necessary information for filling any positions within MSUE is provided for approval. This information will also serve as a guide for posting positions on the MSU Careers website (careers.msu.edu). * This document must be completed and approved by all applicable parties before a recruitment effort may begin. * In a separate email attachment, include an updated Position Description when sending this document to MSUE HR. | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Position Information** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Position Requested by:** | | | | | | | Click here to enter text. | | | | | **Requestor’s Title:** | | | | | | | | | | Click here to enter text. | | | |
| **Date of Request:** | | | | | | | Click here to enter a date. | | | | | **Desired Date of Hire:** | | | | | | | Click here to enter a date. | | | | | | |
| **Position Supervisor:** | | | | | | Click here to enter text. | | | | | | **Type of Position:** | | | Choose an item. | | | | | | | | | | |
| **Reason for Request:** | | | | | | Choose an item. | | | | | | **To replace:** | | | Click here to enter text. | | | | | | | | | | |
| **Position Title:** | | | | | | Choose an item. | | | | | | **Other Position Title:**  Must align with approved MSU/MSUE titles | | | | | | Click here to enter text. | | | | | | | |
| **Programming Area:** | | | | | | Click here to enter text. | | | | | | **Institute:** | | | | | | Choose an item. | | | | | | | |
| **District:** | | | | | | Choose an item. | | | | | | **FTE:** | Choose an item. | | | | **Starting Pay:** | | | | | | | Click here to enter text. | |
| **Primary County Office:**  Street Address/City/Zip | | | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | |
| **Primary Phone Number:**  Required | | | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | |
| **Primary Coverage Area:**  If specific to position | | | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | |
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| **Recruiting** Most positions are required to be posted for a minimum of 14 days. | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Desired date of posting:** | | | | | | | | Click here to enter a date. | | | | **Length of posting:** | | | | | | | | | Click here to enter text. | | | | |
| **Who may apply for this position?** | | | | | | | | | | | | Choose an item. | | | | | | | | | | | | | |
| **Languages, other than English, desired in the candidate for this position:** | | | | | | | | | | | | | | | | | | | | | | | | | |
| None | | | 1st Preference: | | | | | | | Click here to enter text. | | | | 2nd Preference: | | | | | | Click here to enter text. | | | | | |
| **Additional Posting Information:**  The Position Description, including minimum and desired qualifications, will be used to create the posting. If there is any additional information you wish to be included in the posting, please provide in a separate attachment. | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Interview/Search Committee:**   * The Institute Director retains the prerogative for involvement in any interview process, at whatever level desired, whether in person or by representation. * The ID, DD & SE, when appropriate, will determine who takes the lead on recruiting effort. * The lead or search chair should be the first individual list below. | | | | | | | | | | | | | | | | | | | | | | | | | |
| List Search Chair: | | | | Click here to enter text. | | | | | | | List Committee Members: | | | | Click here to enter text. | | | | | | | | | | |
| **End Date/ Fixed Term Appointments**  Select the applicable option: | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Academic position - post with one-year fixed term end dated language; the end date will be one year from the hire date. | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Non-Academic positions – requested position is an Extension Program Instructor, Community Nutrition Instructor or 4-H Program Coordinator - post with one-year end dated language; the end date will be one year from the hire date. | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Support Staff position – post with one-year end dated language; the end date will be one year from the hire date. | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Support Staff position- end date does not apply. | | | | | | | | | | | | | | | | | | | | | | | | |
| **If advertising is needed in addition to the** [**standard avenues**](https://www.canr.msu.edu/od/human_resources/internal_hiring_procedures_forms/) **already established, please list desired locations that MSUE HR can assist with in the box below.** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Funding for Salary & Fringes** | | | | | | | | | | | | | | | | | | | | | | | | | |
| * County MOA funding - Requires signed memorandum on file in the Extension Business Office. * Grant - If ends before 1-year end date provide secondary account number. * Other Partner/ Organization/Budget Allocation - If a budget allocation, this form must also be routed to the MSUE Budget Director. | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Account Name** | | | | | **Account Number** | | | | | | | **Sub-account** | | | | **Project Code** | | | | | | | **Percentage %**  Must total 100% | | **End Date of Funding, or 12/31/9999** |
| Click here to enter text. | | | | | Click here to enter text. | | | | | | | Click here to enter text. | | | | Click here to enter text. | | | | | | | Click here to enter text. | | Click here to enter text. |
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| **Hire Authorization/Approvals**  Checking a box indicates that you have discussed this with the appropriate parties. Form should not be submitted until this is complete. | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Director’s office is aware of and authorizes this hiring request. | | | | | | | | | | | | | | | | | | | | | | | |
|  | | If budget allocation is noted above, MSUE Budget Director is aware, has approved and confirmed the allocation/funding account(s) to be used. | | | | | | | | | | | | | | | | | | | | | | | |
|  | | ID and/or AID has approved this hiring request. | | | | | | | | | | | | | | | | | | | | | | | |
|  | | DD has been made aware of and will be involved in the recruiting process for this position. | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Institute Fiscal Officer is aware this position is being filled and has provided or confirmed the above-noted funding. | | | | | | | | | | | | | | | | | | | | | | | |