



INTERIM APPOINTMENT REQUEST FORM

(Note: This form must be accompanied with the current resume of the recommended candidate.)

Forward to:

Email:

Date:

- | | |
|---|---------------|
| 1. Department Name: | Cost Center: |
| 2. Title of Interim Position: | Pay Grade: |
| 3. Title of Budgeted Position: | Pay Grade: |
| 4. Former Incumbent Name: | Badge: |
| 5. Former Incumbent Job Title: | Pay Grade: |
| 6. Reason Position was Vacated: | Date Vacated: |
| 7. Justification for Interim Appointment: | |
| 8. Recommended Interim Candidate: | Badge: |
| 9. Recommended Candidate's Current Job Title: | Pay Grade: |
| Department Head Approval: | |

Print Name

Signature

Date

APPROVED	<input type="checkbox"/>		
DENIED	<input type="checkbox"/>	Chief Human Resources Officer, Human Capital	Date

For Office Use Only

Position Verified by:		Date:	
Minimum Qualifications		Interim Compensation	
Interim Position: _____ Meets MQs: <input type="checkbox"/> Yes <input type="checkbox"/> No Reviewed by: _____ Date: _____ Comments: _____		Current Rate: _____ <input type="checkbox"/> Grade Minimum: <input type="checkbox"/> 5%: *Approved rate to be checked off by Compensation Analyst (CA) CA: _____ Date: _____ Comments: _____	
Date Offered	Accepted	Date Effective	Anticipated End Date