

Indiana University Kokomo Position Request Authorization

REQUEST IS FOR: NEW POSITION REPLACEMENT

Department/Division _____

Rank Code/Position Title _____

TEMPORARY _____ TENURE TRACK _____ ADMINISTRATIVE _____

CLERICAL _____ TECHNICAL _____ PHYSICAL PLANT _____

FALL _____ SPRING _____ ACADEMIC YEAR _____

SALARY RANGE _____ (lowest to highest)

If this is a replacement request, provide name, budget position number and salary of employee being replaced: _____

Attach a position description.

**Position Justification (state in detail the benefits to the unit and campus to be realized if request is approved, as well as affects of disapproval).
Attach on a separate sheet.**

REQUESTED BY:

Unit Head/Division Chairperson/Appropriate Vice Chancellor

Date

Vice Chancellor for Academic Affairs (Faculty Positions)

Date

Vice Chancellor for Administration and Finance (All Positions)

Date

I hereby authorize search and screen procedures to begin action on the above position. Further actions should adhere to the Search and Screen Procedures.

ANTICIPATED DATE OF EMPLOYMENT _____

REQUEST APPROVED _____

Chancellor

REQUEST DENIED _____

Date

Attach reason(s) on separate sheet for denial.