

Asnuntuck Community College

Personnel Request Form

Date: \_\_\_\_\_

Board Title or Classification: \_\_\_\_\_ Employee Name: \_\_\_\_\_

Parenthetical Title: \_\_\_\_\_

Full-Time: \_\_\_\_\_ Reclassification: \_\_\_\_\_  
Part-Time: \_\_\_\_\_ Increase in Hours: \_\_\_\_\_  
(Hours) (Proposed Hours)

Justification for Position and Rank:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Bi-Weekly Salary: \_\_\_\_\_ Fund: \_\_\_\_\_  
*Or hourly rate for part-time*

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_  
*(Should be start of a payroll period)*

Permanent Position: \_\_\_\_\_ or Temporary Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Attach a revised table of organization and a copy of the job description for a new position.

\_\_\_\_\_  
Dean Date

\_\_\_\_\_  
Dean of Administration Date

\_\_\_\_\_  
Director of Personnel Date

\_\_\_\_\_  
President Date

Cc: Dean of Administration  
Dean  
President