Authorizations for Recruitment and Hiring for Full-Time Faculty Position

**Note:** Proceeding with the recruitment process without authorization will result in all recruiting expenses being charged to the Department (or School if the Department does not have a separate budget). No contract will be issued for any position unless all approvals have been obtained.

**Phase I: Initiate Recruiting and Advertise**

1. **Authorization to Initiate Recruiting.**
   
   *Attach position justification and position description.*

   Dept: ____________________ Position requested: ____________________

   This position is:
   a. Continuing (“tenure track”)
   If so, it is New: _______ Replacement: __________ (Replacing: __________ )

   b. Temporary/Visiting (“non tenure track”)

   Duration: 1 semester: _______ 1 year: _______
   New: _________ Replacement: __________ (Replacing: _____________ )

   **Note:** “Visiting” Faculty may not be employed on a full time basis for more than five years.

   Projected Costs:
   Salary Range: __________
   Total of other Estimated Costs: __________

   a. The faculty office location

   b. The estimated cost, if any, to refurbish office, including furniture. Please determine if this amount exceeds the amount allocated by the VPAA’s office. Only permanent faculty hire is eligible for refurbished office space. __________

   c. The location of the research/creative productivity space, if applicable. __________

   d. The estimated cost, if any, to refurbish research/creative productivity space. Only permanent faculty hire is eligible for refurbished research/creative productivity space. __________

   e. The identification in the attached faculty justification of any special needs for the position (more advanced computer, discipline specific software, etc.). Include estimated cost in this form. ____________________________

   f. Source of funding if position is approved for the b, d, and e. ______________

   g. Indication of whether the hire is a candidate for GIFD and at what the level (low, middle, high) of support. __________

Rev. 10-1-10
Note: Work orders for any required renovations must be submitted to facilities by February of the search. If a failed search occurs, the work order must be withdrawn.

Dean________________ Date________ VPAA___________ Date________

2. Authorization to Advertise.

Attach ad copy for approval and recruitment plan. Upon approval, submit ad copy, authorization, and address/fax# to Human Resources.

Ad to Run in: ______________________

Approximate Cost: ___________________

Dean: ______________ Date: _______ VPAA: _____________ Date: _____________
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Phase II: Interview and Extend Offer

3. Authorization to Interview.

Names of candidates to be interviewed:

a) __________________________________________________________

b) __________________________________________________________

c) __________________________________________________________

d) __________________________________________________________

e) __________________________________________________________

f) __________________________________________________________

Dean: __________________________ Date: __________________________

4a) Authorization to Extend Offer: FIRST CHOICE

Candidate’s Name: ____________________________________________

Position/Rank: ____________ Starting Date: __________

Salary: ____________

GIFD: ____________

Computer needs: ____________ Source of funds if above the basic package ______

Special Conditions: ____________________________________________

__________________________________________________________

Moving Expenses: ____________

Dean: ____________ Date: ______ VPAA: ____________ Date: ____________

Rev. 10-1-10
Authorizations for Recruitment and Hiring for Full-Time Faculty Position

Phase II: Interview and Extend Offer (cont.)

4b) Authorization to Extend Offer: SECOND CHOICE

Candidate’s Name: __________________________________________

Position/Rank: _______________        Starting Date: ___________

Salary: _______________

GIFD: _______________

Computer needs: __________   Source of funds if above the basic package_______

Special Conditions: __________________________________________
                                                                 __________________________________________

Moving Expenses: _______________

Dean: __________ Date: ______ VPAA: __________ Date: __________

4c) Authorization to Extend Offer: THIRD CHOICE

Candidate’s Name: __________________________________________

Position/Rank: _______________        Starting Date: ___________

Salary: _______________

GIFD: _______________

Computer needs: __________   Source of funds if above the basic package_______

Special Conditions: __________________________________________
                                                                 __________________________________________

Moving Expenses: _______________

Dean: __________ Date: ______ VPAA: __________ Date: __________