|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **NMT PERSONNEL REQUISITION**  ***Attach a Current Position Description Questionnaire (PDQ)*** | | | | | | | |
| **DATE:** | | | | **[*HR Use Only]***  **VACANCY NUMBER:** | | | |
| **JOB TITLE: (30 Character Max): Number of Approved**  **Positions:**      **\_\_\_\_\_\_\_\_\_\_\_** | | | | **PERSONNEL REQUEST DUE TO:**  Transfer  Promotion  Termination  Retirement  Addition (see below)  New Position (see below)  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **ESSENTIAL JOB FUNCTIONS:**  Same as Previous  Upgraded Job Functions (If upgraded, please attach updated PDQ with upgraded job functions listed in red) | | | | **ADDITION/NEW POSITION RATIONALE:**  Please attach a memo to explain the rationale for requesting the addition or new position(s), including Budget Office review/approval. | | | |
| **REPLACEMENT: List employee(s) being replaced**  **Termination Date:** | | **[*HR Use Only*]**  **EEO Class** | | **DIVISION** | | | **DEPARTMENT & ORG** |
| **[*Budget Use Only*]**  **NAME OF SUPERVISOR Position #** | | **[*HR Use Only*]**  **Pay Grade** | | **STARTING WAGE/SALARY** | | | **DATE POSITION IS AVAILABLE** |
| **REGULAR**  **TEMPORARY** (One year employment) End date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **EMERGENCY\*** (Max 3 months employment) End date: \_\_\_\_\_\_\_\_\_\_\_\_\_  \* (less than 30 hours per week) | | | | | | **RECRUITING METHOD:**  Internal Department (5 days)  Internal Campus (7 days)  Open Recruiting   * 7 days on campus then off campus   Concurrent Posting   * Attach memo explaining need for posting | |
| **FULL TIME** (40 HOURS PER WEEK)  **PART TIME**  NUMBER OF HOURS PER WEEK\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| **ADVERTISEMENT:**  (Please list newspapers, professional journals, conferences, websites and other media where this position will be advertised)  El Defensor Chieftain  Santa Fe New Mexican  Albuquerque Journal  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
| **FUND NUMBER FOR ADVERTISING AND POSTAGE COSTS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | |
| **PAYROLL FUND NUMBER AND ALLOCATION PERCENTAGE:**  **Fund Account Percent**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_**  **Duration of Funding:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | ***[Budget Office Use Only]***  **I & G \_\_\_\_\_\_\_\_%  RPSP \_\_\_\_\_\_\_\_%**  **Grant/Contract \_\_\_\_\_\_\_\_%**  **Endowment \_\_\_\_\_\_\_\_%  Other \_\_\_\_\_\_\_\_%**  **Insufficient Budget \_\_\_\_\_\_\_\_\_\_\_\_ (initials)** | | |
| **COMMENTS/REMARKS:** | | | | | | | |
| APPROVAL SIGNATURES Approval signatures will be obtained in the order below. | | | | | | | |
| **1. Requesting Supervisor Date** | | | **6. Budget & Analysis Date** | | | | |
| **2. Department Head Date** | | | **7. Sponsored Projects (if applicable) Date** | | | | |
| **3. Division Dir./VP Date** | | | **8. VP for Admin & Finance Date** | | | | |
| **4. Human Resources Date** | **5. AA/EEOC Date** | | **9. President Date** | | | | |
| **Requisition Form Revised: May 2021** | | | | | | | |

***For Budget Only-Position #s:*  \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**