

SEWANEE

THE UNIVERSITY OF THE SOUTH

Replacement Job Requisition Form

1. Date: _____
2. Department _____
3. Title of position _____
4. Name of the incumbent (person currently or previously in position) _____
5. Org & Account Code _____ (the six and four digit codes salary will be charged)
6. Is this position Exempt/Non-Exempt Salary _____ Hourly _____
*Overtime exemption status will be determined at the time of hire based on the rate of pay.
7. Career Band _____ Salary Range: Min _____ Mid _____ Max _____
If changes are being made to the position, HR will need to review.
8. Will there be a change in the position's classification? No: _____ Yes: _____
9. Is this position Regular _____
Term _____ From _____ To _____
10. Yearly schedule Full Year _____
Academic Year: 9 month _____ 10 month _____
Other Months _____ Weeks _____
11. Weekly schedule Hours/week (non-exempt) _____ Percentage (exempt) _____
12. Benefits eligibility will be determined by HR based on the information above and definitions below.
 - Full-time – a position greater than or equal to 1,560 yearly hours (30 hrs/wk full year) or 75%
 - Full-time benefits = regular appointment with over 1,560 yearly hours
 - Short-term benefits = 1 or 2 year term appointments with 1,560 yearly hours
 - Part-time – a position less than 1,560 yearly hours or 75%
 - Half-time benefits = regular appointment with over 1,000 yearly hours
 - Ineligible for benefits = regular appt less than 1,000 yearly hours or term appts with less than 1,560 yearly hours

13. Budget and Salary Projections:

*Salaried positions may skip the hourly rate and yearly hours boxes in sections 1 & 3

1) Incumbent's Salary		2) Budget Impact (check one)		3) New Hire Expectations	
Hourly Rate		No change		Hourly Rate	
Yearly Hours	X	Savings		Yearly Hours	X
Yearly Salary	=	Increase		Yearly Salary	=
Benefits at 34%	X	*if marked "no change" - stop & move to question #14		Benefits at 34%	X
Total Cost	=			Total Cost	=

13a. Salary Impact #1 Cost _____ minus #3 Cost _____ equals _____

*An increase to the budget will require an explanation within question #16

14. Please detail the reporting structure for this position. To which position will this position report and which position(s) will report to them? Are you expecting to restructure with this replacement? You are welcome to explain below or attach an organizational chart.

Position's direct supervisor:	
The position will supervise:	
Restructure Yes or No? If yes, explain:	

15. What are the expected additional costs associated with this replacement position (new furniture, new office, etc.) and how will you manage those expenses?

If an increase in salary is requested, the following questions (16 & 16a) must be completed:

16. Explain in detail how this replacement position will impact your budget for the current and next fiscal years. For instance, are there funds available in your budget for the current fiscal year? Will you reclassify or otherwise adjust your budget this or next fiscal year? Have you requested additional funds to support this position? If so, how much? What is your contingency plan if additional funds are not made available?

16a. Org & Account Code to pull funds to cover additional salary requested _____

*After the replacement hire is finalized, HR will work with Finance to transfer the appropriate funds from the org & account noted into the salary line (question #5) to cover any additional salary. If additional funds are not needed, no funds will be transferred.

17. Attach a copy of the proposed position classification (job) description.

18. Posting the position* 5 day Internal/Web Only _____ Minimum Posting
 10 day Regular Hourly _____ *Includes a Messenger Ad*
 Regular Salary (Ex & NE) _____ *Includes a Messenger Ad*

*All postings may automatically pull onto Indeed.com and any affiliations of Indeed.com
 Do you want to advertise outside of the internal, website and Messenger posting?
 If yes, please provide location's names and addresses.

Supervisor/Dept. Head _____ Date _____
 Division Head _____ Date _____
 Human Resources _____ Date _____
 Provost's Office _____ Date _____