



# WALNUT VALLEY UNIFIED SCHOOL DISTRICT

## PERSONNEL REQUEST FORM

<b>Routing:</b>		
Personnel	<input type="checkbox"/> Certificated	<input type="checkbox"/> Classified
Fiscal Services	<input type="checkbox"/> Position Control	
Personnel	<input type="checkbox"/> Certificated	<input type="checkbox"/> Classified

**Instructions: After completing this form, please send to either Certificated Personnel or Classified Personnel.**

TO: PERSONNEL OFFICE

FROM: \_\_\_\_\_ SCHOOL \_\_\_\_\_  
 \_\_\_\_\_ Date Initiated \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_  
Name and Signature of Principal/Department Head

JOB TITLE/ \_\_\_\_\_ JOB \_\_\_\_\_  
 DESCRIPTION: \_\_\_\_\_ CLASS # \_\_\_\_\_ DATE REQUIRED: \_\_\_\_\_

ACTION: \_\_\_\_\_ INCUMBANT: \_\_\_\_\_

**Position #** \_\_\_\_\_  New Position  Replacement  Additional Time  Full Time Number of Hours \_\_\_\_\_  
**CERTIFICATED**  Contract  Hourly  Daily  Extra Period  Part Time Work Hours \_\_\_\_\_  
**CLASSIFIED**  Permanent  Temporary  Limited Term  Sub  Hourly Number of Months \_\_\_\_\_

**MUST BE COMPLETED BY PRINCIPAL/DEPARTMENT HEAD FOR BUDGETARY PURPOSES:**

	%	FD	RES/PY	GOAL	FUNC	OBJ	LOC		%	FD	RES/PY	GOAL	FUNC	OBJ	LOC
1								7							
2								8							
3								9							
4								10							
5								11							
6								12							

**For new positions/additional time: the estimated total cost of position salary and related benefits is \$ \_\_\_\_\_.** My signature indicates that there are sufficient funds in this program to meet present obligations and this added position.  Yes  No

\_\_\_\_\_  
Signature Position Control Date \_\_\_\_\_ Comments: \_\_\_\_\_

Board Action: \_\_\_\_\_

\_\_\_\_\_  
Approval of Division Assistant Superintendent Date \_\_\_\_\_ Final Approval of Assistant Superintendent Personnel Date \_\_\_\_\_

### TO BE COMPLETED BY PERSONNEL DEPARTMENT

Person Selected \_\_\_\_\_ Effective Date \_\_\_\_\_  
 for Employment: \_\_\_\_\_ of Assignment: \_\_\_\_\_ Hourly Assignment: \_\_\_\_\_

Salary Schedule \_\_\_\_\_ Range: \_\_\_\_\_ Step: \_\_\_\_\_  
 \_\_\_\_\_  
 Signature of HRS Operator