

STAFF REQUISITION FORM

TO: HUMAN RESOURCE DIVISION

FROM:

_____ SUPERVISOR'S NAME	_____ Signature	_____ Date
_____ MANAGER'S NAME	_____ Signature	_____ Date
_____ GENERAL MANAGER'S NAME	_____ Signature	_____ Date

REQUIREMENT DETAILS

JOB TITLE: _____	TOTAL DAYS: _____
PERMANENT <input type="checkbox"/> _____	TEMPORARY <input type="checkbox"/> _____
REPLACEMENT <input type="checkbox"/> _____	ADDITION <input type="checkbox"/> _____

QUALIFICATIONS:

EXPERIENCE:

SPECIAL SKILLS/PERSONALITY

MAIN DUTIES

HUMAN RESOURCE OFFICE

RECRUITMENT LEVEL: _____

GRADE: _____

SALARY/WAGES: _____

TYPE: ☐ Casual ☐ Temporary

COMMENTS / APPROVAL:

HR MANAGER'S NAME

Signature

Date

FD'S NAME

Signature

Date

CHIEF EXECUTIVE OFFICER

Recruitment ☐ APPROVED ☐ NOT APPROVED

CEO NAME

Signature

Date