MOLLOY UNIVERSITY

Request to Hire for Staff

All request must be submitted with a position justification and updated job description to requeststohire@molloy.edu Once the request is approved Human Resources will be in touch.

Position Details.

Hiring Manager: _____ **Proposed Start Date:** _____

☐New Position ☐Replacement ☐Grant-Funded

Is this position one of the following?
☐ **Tier 1: Critical (Defined as student facing, compliance related, or enrollment impacting)**
☐ **Tier 2: Budgeted (Defined as a replacement or previously budget-approved position)**
☐ **Tier 3: Not Budgeted (New position/salary request does not currently exist in the budget)**

Position Title: _____

Status: ☐Full-Time or ☐Part-Time **Total Hours Per Week:** _____

Reduce Weeks: ☐ No ☐ Yes, # of weeks _____

Remote Work Eligible: ☐Yes (Occasional) ☐Yes (Full) ☐No

Hiring Manager: _____ **Date:** _____
Dean (If applicable): _____ **Date:** _____
Department Vice President: _____ **Date:** _____

Human Resources (To be filled out by HR only).

FLSA: ☐Exempt
☐Non-Exempt (Salaried)
☐Non-Exempt (Hourly)

Position Control: _____

Grade Level: _____

CUPA: _____

Pay Transparency Range: _____

Will this search require a search committee liaison? ☐Yes ☐No

Assistant Vice President of HR: _____ **Date:** _____

Finance (To be filled out by Finance only).

Budget: ☐Yes, **Budgeted $** _____ ☐No

Budget Comments: _____

Controller: _____ **Date:** _____

Vice President for Finance & Treasure: _____ **Date:** _____

New Position Only
President: _____ **Date:** _____

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Position Justification Form

Position Justification Form.
Position Title: _____ **Supervisor**: _____ **Date**: _____
Questions.
What are the major responsibilities of this position?
Please include a short summary of how this position assists the institution in achieving its vision, mission and goals.
Is this a revenue generating position. If so, please detail the expected revenue.
Does this position have a campus-wide impact? If so, please elaborate.
Would process/technology improvements eliminate the need to fill this position?
How many similar positions do you have in the department? Please provide all similar titles.
How long can you continue without filling the position?
How have you covered this vacancy thus far?
How will this work be done if approval cannot be granted and by whom?

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What alternatives to filling the position or changing the duties have been considered?

Have you considered the following:

	Yes	No
Change to Part-Time		
Convert to a 9, 10, or 11-month position		
Combine this role to be with another position		
Transfer an underutilized person from another department to be transferred into this position?		

Please attach any additional information you feel is important to the review of this request. The Office of Human Resources is available to help with the identification of internal resources.