



ARCHDIOCESE OF AGANA

Chancery Office

196B CUESTA SAN RAMON HAGATNA, GUAM 96910
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RECRUITMENT AUTHORIZATION FORM

Hiring Official/Position: (Print Name and Signature)	Department:
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Phone No.:	Email:
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A. POSITION INFORMATION

Position Title:	Position Number:
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<input type="checkbox"/> New Position	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Regular	<input type="checkbox"/> Exempt	<input type="checkbox"/> Other Information: _____
<input type="checkbox"/> Existing Position	<input type="checkbox"/> Part-Time	<input type="checkbox"/> Temporary	<input type="checkbox"/> Non-Exempt	

Start Date:	End Date: <small>If position has an end date, is contractual, please provide end date.</small>
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Number of Hrs. Per Week:	Name of Employee Being Replaced (if applicable):
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Please provide a brief justification of the position:

B. POSITION FUNDING

Department may recruit up to the current budgeted salary, but not to exceed the salary range midpoint. Additional salary funds require prior approval by the Finance Officer and Chancellor

Hourly or Salary Range:	Minimum: \$ _____	Midpoint: \$ _____
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Current budget: \$ _____ per hour or \$ _____ salary	Other Expense /Benefits if Applicable
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Funding Source (s): _____ % _____ _____ % _____	HR USE ONLY EEO Code _____ SOC Code _____
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C. RECRUITMENT

Search Committee Chair:	Search Committee Secretary:
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Search Committee Members: *(These individuals will be granted access to applicant materials.)*

Recruitment Sources or Instructions - *(Please indicate if there are additional places to post this job. All jobs are posted at archdiocese website.)*

D. AUTHORIZATION SIGNATURES

Department Head or Director:	Date:
Delegate General:	Date:
Chancellor:	Date:
Finance Officer:	Date:
Office of Human Resources:	Date:

HR USE ONLY

Name of Employee Hired:	Start Date:
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