

Andrews University

Human Resources

Berrien Springs, MI 49104-0840, email: hr@andrews.edu
(269) 471-3302, fax (269) 471-6293

Job Posting Request Form

Requested By _____ Date _____

Job Title _____ Department _____

Salary/Hourly Range _____ Hours per week _____
Please see Compensation Analyst

Position applied for is:

Employee Class (*check one*)

FA – Faculty Admin (90-100%) [Academy, 88-100%]	AP – Admin Part-time (<74%)	SF – Salaried Full-time (75%-100%)
FF – Faculty 11-12 Month (90-100%) [Academy, 88-100%]	HF – Hourly Full-time (35-40 hours/week)	SP – Salaried Part-time (<74%)
FT – Faculty 9-10 month (75-89%) [Academy, 75-87%]	HP – Hourly Part-time (30-34 hours/week)	SC – Salaried Contract
FP – Faculty Part-time/less than 9 months (<74%)	HH – Hourly Half-time (20-29 hours/week)	TF – Temp Full-time
FC – Faculty Temp Contract	HU – Hourly Under Half-time (<20 hours/week)	TP – Temp Part-time
AF – Admin Full-time (75-100%)	SA – Salaried Admin (75%-100%)	

Is this position a change from hourly to salary: Yes ___ No ___

Budget where position will be charged: _____
Fund _____ Orgn _____ Acct _____ Prog _____ Activ _____

Has the position been approved in the current fiscal year budget? Yes ___ No ___

Is this replacing someone? Yes ___ No ___

Who is this position replacing? _____

If no, is it a new budget position? Yes ___ No ___

Why is this position needed? _____

Could this job be shared with another employee? Yes ___ No ___

If no, please explain: _____

Could this job be done by a student? Yes ___ No ___

If no, please explain: _____

Date the Position is Available _____ Posting Date _____

_____ Check here to request Union Paper posting

* Advertisement takes 6-8 weeks or more to be published.

-Please Complete Reverse Side-

Apply To

Supervisor's Name: _____

Phone Number: _____

Hiring Administrators: 1)* _____

* required

2) _____

Primary Duties

Qualifications

Must be a Seventh-day Adventist in good and regular standing.

*Chair/Supervisor's signature

*Dean/Director's signature

*Controller's signature

Vice-President's signature/Provost

*Compensation Analyst's signature

*indicates required signature

For Human Resource Use Only:

Date Received

Date Posted

Date Position Filled

Position # _____

Grade _____