

Requested by:		_ on		_		
	Faculty/Staff		Date			
Who will be the UTen	np's direct supervisor	2				
IDT Account Number:						
UT Job Title:						
Hourly Rate:						
Start Date:	art Date: Projected End Date:					
If you have already lo	cated a candidate for	the position, please	provide their nam	ne and EID:		
If this is to replace a c	current or previous UT	emp, please provide	their name:			
Will the UTemp need	a UT photo ID?	Yes	No			
Will the UTemp drive	a UT vehicle?	Yes	No			
Hours Per Week:						
Work Hours:						
Additional notes abou						
Will this position re	equire access to the	Mainframe (i.e. Dl	EFINE, processin	g travel autho	prizations and	
reimbursements, pure	chase orders, office su	upplies, etc.)?	Yes	No		
Please choose an opti	ion:					
I would like t	o review resumes bef	ore a UTemp is assigr	ned			
l would like L	JTemp's staff to review	w resumes and assign	n a UTemp			
Purpose of Position:						

**Essential Functions:** 

**Required Qualifications:** 

**Preferred Qualifications:** 

**Working Conditions:** May work around standard office conditions. Repetitive use of a keyboard at a workstation. Use of manual dexterity. [Add any additional work conditions, such as travel, within and outside of Texas, work on nights and weekends, etc.]

\*Note: If office space is needed, please consult with Tomas Gomez, <u>taomez@austin.utexas.edu</u>

Signature of Electronic Signature of Mgr. or Designee

Date

Date

Signature – Approved by CBO or Dean

Please submit this form to Fran Pena in HR at f.pena@austin.utexas.edu