Position Requisition Form

Department Name: _____
Position Title: _____
Hiring Manager: _____

Today's Date: __________________________
# of Openings: __________________________
Grant System Access to: __________________

Reason for Requisition:
☐ New – Justification: __________________________
☐ Replacement for: __________________________

External Advertisements (include URL for online ads):
________________________________________

Funding Source(s): Check and provide Project #s, if applicable

☐ Department Funding: _____
  ☐ OOI

☐ Funded Grants: _____

Position Information for Job Posting:

☐ Expected Salary __________

☐ Regular OR
  ☐ Temporary - Dates: _____ to _____
  ☐ Full-Time
    ☐ ¾ Time (≥ 30 hours/wk)
    ☐ ½ Time (≥ 20 hours/wk)
    ☐ Casual (> 3 months, <20 hrs/week)
    ☐ Casual (< 3 months)

Specific Duties To Be Performed: __________________________
________________________________________

Education Desired: __________________________

Previous Experience Desired: __________________________

Special Requirements:

☐ Security Clearance Required
TWIC Required
Sea Duty Required
CDL License Required
Position Drives WHOI Vehicles

PHYSICAL ATTRIBUTES (complete attached)

1. Please check any activities listed below that are considered “essential functions” which cannot be covered through “reasonable accommodations”:

<table>
<thead>
<tr>
<th>Lifting:</th>
<th>Carrying:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Less than 25 lbs.</td>
</tr>
<tr>
<td>Yes</td>
<td>0-10 lbs.</td>
</tr>
</tbody>
</table>

2. Physical requirements of position:

   - Continuously sedentary
   - Mostly sedentary
   - Occasional standing/walking
   - Occasional prolonged standing/walking
   - Frequent prolonged standing/walking
   - Prolonged; extensive or considerable standing/walking
   - Kneeling
   - Bending
   - Stooling
   - Twisting
   - Pushing
   - Pulling
   - Climbing Ladders/Stools
   - Reaching (above shoulders)
   - Reaching (below shoulders)

3. Occupational requirements:

   - Depth Perception
   - Far vision
   - Near vision
   - Peripheral vision
   - Ability to distinguish basic colors
   - Hearing
   - Talking
   - Travel
   - Other

   Explain: Click here to enter text.

4. Exposure to the following conditions:

   - Excessive cold
   - Excessive heat or humidity
   - Dust or other irritants
   - Grease and oils
   - Other
   - Infectious and contagious diseases
   - Hazardous substances or specimens
   - Electrical/mechanical/power equipment hazards
   - Odorous chemicals or specimens

   Explain: Click here to enter text.

APPROVED BY (MANAGEMENT):

<table>
<thead>
<tr>
<th>Department Chair/Admin Manager</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
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</tbody>
</table>

APPROVED BY (HUMAN RESOURCES):

<table>
<thead>
<tr>
<th>Human Resources Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

For HR Use Only:

Date Filled: _____________________  Selected Candidate: _____________________