**Position Requisition Form**

Department Name:       Today’s Date:

Position Title:       # of Openings:

Hiring Manager:       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”:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ] Yes | [ ]  Less than 25 lbs. | [ ]  25-50 lbs. | [ ]  More than 50 lbs. | [ ]  Above shoulder | \_\_\_ # times/day |
| [ ]  Yes | [ ]  0-10 lbs. | [ ]  10-25 lbs. | [ ]  25-50 lbs. | [ ]  50 + lbs. | \_\_\_ # times/day |

Lifting:

Carrying:

1. Physical requirements of position:

|  |  |  |
| --- | --- | --- |
| [ ]  Continuously sedentary  | [ ]  Kneeling | [ ]  Use of hands for basic grasping/manipulation |
| [ ]  Mostly sedentary | [ ]  Bending | [ ]  Use of hands for fine manipulation |
| [ ]  Occasional standing/walking | [ ]  Stooping | [ ]  Pushing |
| [ ]  Occasional prolonged standing/walking | [ ]  Twisting | [ ]  Pulling |
| [ ]  Frequent prolonged standing/walking | [ ]  Climbing Ladders/Stools | [ ]  Reaching (above shoulders) |
| [ ]  Prolonged; extensive or considerable standing/walking | [ ]  Reaching (below shoulders) |
| [ ]  Repetitive Motion | Explain: Click here to enter text.  |
| [ ]  Other | Explain: Click here to enter text. |

1. Occupational requirements:

|  |  |  |
| --- | --- | --- |
| [ ]  Depth Perception | [ ]  Hearing | [ ]  Work around others |
| [ ]  Far vision | [ ]  Talking | [ ]  Work with others |
| [ ]  Near vision | [ ]  Travel  | [ ]  Work alone |
| [ ]  Peripheral vision | [ ]  Other | Explain: Click here to enter text. |
| [ ]  Ability to distinguish basic colors |

1. Exposure to the following conditions:

|  |  |  |
| --- | --- | --- |
| [ ]  Excessive cold | [ ]  Infectious and contagious diseases | [ ]  High location |
| [ ]  Excessive heat or humidity | [ ]  Hazardous substances or specimens | [ ]  Extended periods at sea |
| [ ]  Dust or other irritants | [ ]  Electrical/mechanical/power equipment hazards | [ ]  Severe weather conditions |
| [ ]  Grease and oils | [ ]  Odorous chemicals or specimens | [ ]  Prolonged work hours |
| [ ]  Other | Explain: Click here to enter text. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| APPROVED BY (MANAGEMENT):  |  |  |  |  |
|  |  | Department Chair/Admin Manager |  | Date |
| APPROVED BY (HUMAN RESOURCES):  |  |  |  |  |
|  |  | Human Resources Signature |  | Date |