

BEAR RIVER HEAD START EMPLOYMENT REQUISITION

Coordinators and Supervisors: Have form completed and signed before action is requested.

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| <p><i>If you have any questions regarding the information on this Employment Requisition or hiring procedures of Bear River Head Start, please contact our representative:</i></p> <p>Diane Midkiff Phone: 755-0081, ext. 242 FAX: 755-0125</p> | <p>Date of Request: <u>12/3/2017</u> Action Requested by: <u>Kenise Webb</u></p> <p>POSITION REQUESTED: <u>Family Development Asst</u></p> <p>Check Program: <input checked="" type="checkbox"/> Early Head Start <input checked="" type="checkbox"/> Preschool Head Start</p> <p>Focus Area: <u>Family</u> Center Location: <u>Cache/ID/Box Elder</u></p> | |
| <p>Status:</p> <p><input checked="" type="checkbox"/> Regular (No. Hrs. Day <u>8</u>) <input type="checkbox"/> 9 1/2 Month Position <input checked="" type="checkbox"/> Hours Variable</p> <p><input type="checkbox"/> Part Time (No. Hrs. Week <u> </u>) <input checked="" type="checkbox"/> 12 Month Position <input type="checkbox"/> Hours Fixed</p> <p><input type="checkbox"/> Temporary (Period <u> </u> to <u> </u>)</p> | | |
| <p>Benefits after one year's employment:</p> <p><input checked="" type="checkbox"/> SEP Retirement Plan</p> <p><input checked="" type="checkbox"/> Vacation</p> | <p>Benefits:</p> <p><input checked="" type="checkbox"/> Medical Insurance</p> <p><input checked="" type="checkbox"/> Personal Leave</p> <p><input checked="" type="checkbox"/> 403B Retirement Plan</p> | <p>Desired Hire Date:</p> <p><u>1/20/17</u></p> |
| <p>Rate of Pay: \$ <u>11.62</u> (Circle) Hour / Pay Period / Month Grade: <u>20</u> Step <u>1</u></p> | | |
| <p>Special Needs:</p> <p><u>Degree in Human Service related field preferred</u></p> <p><u>Spanish Speaking preferred</u></p> | | |

OPENING DATE: 1/3/2017 (Allow 2 days after completion for opening date.) CLOSING DATE: 1/18/2017 (Allow 10 working days from opening to closing.)

APPROVED BY: (Signatures authorize expense of advertising this position in newspapers and placing ad with local employment agencies.)

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| <u>Kristie Cuts</u> Coordinator | <u>Verbal</u> Program Director (verbal confirmation) | <u>[Signature]</u> Fiscal Office |
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Distribution of completed form:

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| <input type="checkbox"/> PHS Receptionist <input type="checkbox"/> EHS Receptionist <input type="checkbox"/> PHS Secretary <input type="checkbox"/> Fiscal Assistant/Fiscal Officer | <input type="checkbox"/> Parent Involvement Specialist - EHS <input type="checkbox"/> Parent Involvement Specialist - PHS <input type="checkbox"/> Coordinator/Supervisor Requesting Action <input type="checkbox"/> Hiring File for Position |
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