

**BEAR RIVER HEAD START
EMPLOYMENT REQUISITION**

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

<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 Talbot Phone: 755-0081, ext. 242 FAX: 755-0125</p>	<p>Date of Request: <u>11/29/17</u> Action Requested by: <u>Kenise Webb</u></p> <p>POSITION REQUESTED: <u>Family Advocate PHS</u></p> <p>Check Program: _____ Early Head Start <input checked="" type="checkbox"/> _____ Preschool Head Start</p> <p>Focus Area: <u>Family</u> Center Location: <u>Cache</u></p>									
<p>Status:</p> <table style="width: 100%;"><tr><td><input checked="" type="checkbox"/> Regular (No. Hrs. Day _____)</td><td>_____ 9 ½ Month Position</td><td><input checked="" type="checkbox"/> Hours Variable</td></tr><tr><td>_____ Part Time (No. Hrs. Week _____)</td><td><input checked="" type="checkbox"/> 12 Month Position</td><td>_____ Hours Fixed</td></tr><tr><td colspan="3">_____ Temporary (Period _____ to _____)</td></tr></table>		<input checked="" type="checkbox"/> Regular (No. Hrs. Day _____)	_____ 9 ½ Month Position	<input checked="" type="checkbox"/> Hours Variable	_____ Part Time (No. Hrs. Week _____)	<input checked="" type="checkbox"/> 12 Month Position	_____ Hours Fixed	_____ Temporary (Period _____ to _____)		
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<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>12/15/17</u></p>								
<p>Rate of Pay: \$ <u>2302.00</u> (Circle) Hour / Pay Period <u>(Month)</u> Grade: <u>20</u> Step <u>6</u></p>										
<p>Special Needs:</p> <p><u>Degree in Human Related Service Field</u></p> <p><u>Spanish Speaking Bilingual (English/Spanish)</u></p>										

OPENING DATE: 11/29/17
(Allow 2 days after completion for opening date.)

CLOSING DATE: 12/8/17
(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.)

Krista O'Neil
Coordinator

Verbal approval
Program Director (verbal confirmation)

Ph Smp
Fiscal Office

Distribution of completed form:

____ PHS Receptionist
____ EHS Receptionist
____ PHS Secretary
____ Fiscal Assistant/Fiscal Officer

____ Parent Involvement Specialist - EHS
____ Parent Involvement Specialist - PHS
____ Coordinator/Supervisor Requesting Action
____ Hiring File for Position