

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 Midkiff Phone: 755-0081, ext. 242 FAX: 755-0125</p>	<p>Date of Request: <u>10/27/16</u> Action Requested by: <u>Krista Useche</u></p> <p>POSITION REQUESTED: <u>Cache Teacher Assistant</u></p> <p>Check Program: <u>Early Head Start</u> <input checked="" type="checkbox"/> <u>Preschool Head Start</u> <input type="checkbox"/></p> <p>Focus Area: <u>Center Based</u> Center Location: <u>Cache</u></p>
<p>Status:</p> <p><input checked="" type="checkbox"/> Regular (No. Hrs. Day <u>8</u>) <input checked="" type="checkbox"/> 9 1/2 Month Position <input type="checkbox"/> Hours Variable</p> <p><input type="checkbox"/> Part Time (No. Hrs. Week <u> </u>) <input type="checkbox"/> 12 Month Position <input checked="" 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 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: <u>11/18/16</u></p>	
<p>Rate of Pay: \$ <u>10.00</u> (Circle <u>Hour</u>) Pay Period / Month Grade: <u>3</u> Step <u>7</u></p>	
<p>Special Needs: <u>Spanish speaking required</u></p>	

OPENING DATE: 10/27/16 (Allow 2 days after completion for opening date.) CLOSING DATE: 11/9/16 (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 Useche Coordinator
 approved Program Director (verbal confirmation)
 email approval Fiscal Office

Distribution of completed form:

<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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