

TOWN OF HOLBROOK
OFFICE OF HUMAN RESOURCES
50 NORTH FRANKLIN STREET
HOLBROOK MA 02343

REQUEST FOR PERSONNEL FORM

Union/Union Local # _____ Non-Union RFP#: _____

(For HR use only)

Job Title: _____ Job Class # _____

Position Control #: _____ Date: _____

Department: _____ Division: _____

Type of Request: New Position Existing Position Change in Status Promotion Upgrade

If filling existing position, replacement is for (name): _____

If change in status, please explain: _____

Reason for replacement: Retired Resigned Deceased Other _____

Current employee to be paid through: _____ Current rate of pay (hourly) \$ _____

Status of Position to be filled: Permanent Temporary From: _____ To: _____

Full-time Part-time If part-time, number of hours per week: _____

Requested Salary Range: _____ Hourly Weekly Monthly Yearly

Schedule: (days/hours of work) _____

Department Head Signature: _____ Date: _____

Human Resources Director: Approved Disapproved _____

Signature

Date

Finance Director: Funding Approved Disapproved _____

Signature

Date

Town Administrator: Approved Disapproved _____

Signature

Date

For HR use only:

Position Filled

Yes No Date: _____ Name: _____

Signature

Date