

Leeward Community College Request for Casual Hire

Division / Unit: _____

Warrant: _____

Contact Person: _____

Phone Number: _____

Casual Hire Position Title: _____

Account Code(s): _____

Appointment Period: _____ to _____

Location of Position: _____ Work Schedule (days / times): _____

Number of hours: _____ per week OR _____ total OR Number of Credits: _____

Requested Rate of Pay: _____ per hour / monthly / flat fee / credit (circle one)

How was pay rate determined?

Justification for casual appointment:

Impact if the request is not approved:

Description of Duties:

Required Qualifications (include degrees, certification, license(s), etc.):

Desirable Qualifications:

Number of posting days requested: _____ OR Specific Closing Date: _____
(minimum 3 business days)

Approval of Request:

RECOMMENDED / NOT RECOMMENDED:

Division Chair/Coordinator Date

Dean/Director Date

Funds are available to support this request.

RECOMMENDED / NOT RECOMMENDED:

Account Supervisor/
Principal Investigator Date

Human Resources Office Date

Funds are available to support this request.

APPROVED / NOT APPROVED:

Business Office Date

Vice Chancellor Date

For HRO Use Only:

Job Order No: _____ Date Posted: _____ Closing Date: _____

Date Applications Referred: _____ Date Certification Memo Received: _____

Selectee: _____