

PERSONNEL REQUISITION

**City of Hibbing
401 East 21st Street
Hibbing, Mn 55746**

Date: ___/___/___

Requested by: _____ Title: _____ Dept. _____

Position Requested: _____ Union: _____

___ Full-time ___ Part-time ___ Casual ___ Seasonal ___ Temporary

Dates: ___/___/___ to ___/___/___

Salary: \$ _____ hourly _____ biweekly

Date Needed: ___/___/___

Reason for opening: ___ Replacement for: _____

___ Addition to staff

___ Other-explain: _____

SIGNATURES:

DEPARTMENT HEAD/SUPERVISOR: _____

HUMAN RESOURCES APPROVAL: _____

ADMINISTRATIVE APPROVAL: _____

Position filled by:

Name: _____ Effective Date: _____

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