



SAVANNAH STATE UNIVERSITY

Position Request & Approval Form FACULTY & MAJOR ADMINISTRATORS

Search No. (Same as Applicant Clearing House No.) _____

School _____ Department _____

Rank and Title of Position _____

Tenure

Tenure Track

Non-Tenure Track

Temporary

Part-Time

Check if new position

Annual or Academic Salary or Range: _____

Budget Page & Position No. or Person Replaced: _____

Contract Period: _____ Academic Fiscal Year Other

Discipline: _____

Required Qualifications: Degree _____ Experience _____

Other: _____

Preferred Qualifications: Degree _____ Experience _____

Other: _____

Special Requirements used in screening: _____

Application Deadline _____ Position Starting Date _____

Search Committee Chairpersons Name: _____

Department: _____ Phone: _____

Approvals:

Department Head: _____ Date _____

Dean: _____ Date _____

Vice President: _____ Date _____

Budget Officer: _____ Date _____

President: _____ Date _____

Please Clear All Advertisements with Human Resources/Attach a Copy of Job Description