## **REQUEST TO RECRUIT (AD FACULTY)**

Date: (MM/DD/YYYY)								
From: Org/Dept/POC/Phone	e #:		(Include A	II Informat	ion)			
To: Provost, NPS			(IIICIUUE A	ii iiiioiiiiat	ioni			
Via: (1) VP F&A (2) Dean/Director (3) HRO (4) WMB								
Encl: (1) AD PD Addendum								
(2) <u>Position Designati</u>	ion Report	(if TS or hig	gher clear	ance)				
A. POSITION INFORMATION	ON							
New Position (attach			Existing	g and Vac	ant	F	xisting and	d Filled
Organization Code:							•	J:
		40-RDT8			Provost-R (Overhire)			
Whole or Partial FTE:		.75		.33		.25	-	.10
Part Time or Intermitte (If Less than 1 FTE)	ent: Pa	rt Time	Intermi	ttent	Expecte	d date of	hire:(MI	M/DD/YYYY)
Tenure -Track Faculty Poisition Title: Area of Specialty:								
					-			
Non Tenure -Track Facul Poisition Title:	ty							
Area of Specialty:					_			
Additional Information:								
B. WORKPLAN INFOR	RMATION	1						
Anticipated Teaching -	- Annual/S	eady State	Load:					
Expected Teaching Pro	grams:							

From: Org/Dept/POC/Prione#:	
Position Title:	BIN:
Have you examined teaching capability or expertise for this intended position is available at NPS or your department? ( <i>Provide more than a yes/no response</i> )	ıtside of
C. FUNDING/BUDGET INFORMATION:  Tenure -Track:  Is a standard 9-month-model work plan expected?	
If not, what alternative work plan is anticipated?	
Non Tenure -Track:	
Expected funding profile: Direct %: Reimbursable %: Indirect %: Provide whatever specificity is possible, the program, source, MOA, projects, etc.,	
JONs:	
D. JUSTIFICATION TO RECRUIT (attach separate sheet if needed):	
E. ADDITIONAL INFORMATION:	

From: Org/Dept/POC/Pr	none#:		
Position Title:			BIN:
F. CONFIRMATIONS AND	RECOMMENDATIONS:		
Chair/Department Hea	ad:		
and workload at the t	the level indicated for thi	future funding, teaching demand and faculty activity is new hire. I also confirm this hiring action is withing unless noted in my comments below.	
Signatu	ıre & Date		
_	ire & Bute		
I recommend approva	l of this hiring action and	confirm it is within our school or Directorates allow during the term of the expected employment unle	
Signati	ure & Date		_
VP F&A:	2R and all required do	cuments have been reviewed and verified	
Signatu	ıre & Date		_
Manpower: BIN: Comments (Optional):	Available	Not Aailable	
Signatu	re & Date		_
HRO Director's Recomme	endation: Recommend	Not Recommend	
Signatu	ıre & Date		_
WMB's Recommendation:	: Recommend	Not Recommend	
Approval Authority:	Approved	Disapproved	
Provost:			