**Delegated Staffing Request
For all temporary positions (less than 12 months) or replacement positions that are Grade 8 or below**

If the request is for a fully Externally Funded post please do not use this form.

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| **SCHOOL/DIRECTORATE NAME:****SCHOOL/DIRECTORATE REFERENCE** |

 **Position:** Replacement [ ]  New [ ]

**If Replacement,** please provide the name of the Previous Postholder:

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 **If New,** has the position description and grade been reviewed and approved by HR?

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**Position Title:**

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**Effective From:** XX/XX/XX **Expected End Date:** XX/XX/XX **Grade:** X

**Full time or part time position?** Full Time [ ]  Part Time [ ]

**If part time, how many hours of work?** X Hours/FTE

 **Job Details**

**Organisational Unit**

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 **Work Location**

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 **Reports to (Position)**

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**Finance & Funding Details**

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| --- | --- | --- | --- | --- | --- |
| **Project** | **Project Type** | **Budget Group** | **Fund Source** | **Budget Centre** | **Nominal** |
|  |  |  |  |  |  |

*To be verified by Finance Business Partnering*

**Is the post budgeted?** Yes [ ]  No [ ]

**Explain how this change will impact Finances. For example, how will School/Directorate pay savings targets be delivered?**

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**Senior/ Finance Business Partner Comments:**

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| **Name : Date:**  |

**For temporary positions only: cost and any mitigating savings**Example: Staff member on long term sickness absence so reduced pay cost will offset some backfill cost – set out costs and saving below.

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| This financial year £Next financial year £ |

**HR Review**

**HR Business Partner Comments:**

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| **Name: Date:** |

**Supporting Information**

Please state the reason why the post is required and a brief description of the work that the post holder will undertake. Outline the potential risk if the appointment is not made.

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**Authorisation for Request**

Dean or Director

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Date:

*Please email this completed form to* *PRG@dundee.ac.uk**, copying in both your HR Business Partner and Finance Business Partner.*

*Decision of approval/rejection will be notified via email by PRG admin.*

**SVP/COO Decision**

Outcome and comments

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PRG Secretary signature

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Date:

**HR Admin**

*To be completed by HR if post approved.*

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| --- | --- |
| **Position Number:** |  |
| **Position Title:**  |  |
| **Position Profile:** |  |
| **Job Evaluation Role Code (where applicable):**  |  |
| **Position Added to Hierarchy:**  |  |