



Recruitment Requisition Form Lay/Operational Employee

Position Information:

New *(requires Diocesan Secretary and Executive Officer approval)*

Replacement *(temporary)*

Replacement *(permanent)*

Section A:

Position Title:

Department:

Current/former Incumbent:

Effective date of vacancy:

PD reviewed by:

Date:

Division/Cost Centre:

Is the position within budget?

Is the position the same
FTE/Salary as the previous
incumbent? *(If no, please provide justification)*

Recruitment Method: Fill without posting *(Attach justification)*

Advertise internally

Advertise internally and externally

Recruitment agency *(only if approved)*

Basis of employment:

Fixed term period: From To

Position FTE:



Days of the weeks required (*tick all that apply*)

Days	Hours	Days	Hours
Monday		Friday	
Tuesday		Saturday	
Wednesday		Sunday	
Thursday		Nights	

Remuneration

Applicable Award and Classification Level (*if unknown please check with HR*)

Salary/Wages	Minimum Award Rate	\$	%
	Hourly Rate (please specify)	\$	%
	Annual Salary (please specify)	\$	%
Stipend	For Lay Ministers or Lay Chaplains (please specify)	\$	%
Allowances and Benefits	Travel Allowance (specify percentage or amount)	\$	%
	Phone Allowance (the standard amount is)	\$	%
	Housing Allowance (specify percentage or amount)	\$	%
	Professional Development (specify maximum amount)	\$	%
	Other (please specify)	\$	%



Requisitioner's Declaration:

In signing this declaration, I confirm that this requisition complies with PDT policies and procedures and that the request is within approved budgets.

Name:

Position:

Signature:

Date:

Section B

Approval to Hire (complete only AFTER selecting the preferred candidate)

Candidate Name:

Proposed Start Date:

Proposed Salary: \$

**Church House/SVAC
Wollaston/Cathedral
Employees**

Approved by:

CFO

Diocesan Secretary

Signature:

Date:

ACF Employees

Approved by:

ACF Executive Officer

Chairman of the Board

Signature:

Date:

**Parish and Cathedral
Employees**

Approved by:

Parish Council

Cathedral Chapter

Signature:

Date:

Please attach a copy of the meeting minutes to the requisition

Other approval method (please specify)