



# Town of Wrentham

Office of Human Resources

79 South Street

Wrentham, MA 02093

Tel: 508-384-5448 Fax: 508-384-5403

www.wrentham.ma.us email: hr@wrentham.ma.us

## Request for Personnel Form

Union/Union Local # \_\_\_\_\_  Non-Union RFP#: \_\_\_\_\_  
(For HR use only)

Job Title: \_\_\_\_\_ Job Class # \_\_\_\_\_

Position Control #: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_ Division: \_\_\_\_\_

Type of Request:  New Position  Existing Position  Change in Status  Promotion  Upgrade

If filling existing position, replacement is for (name): \_\_\_\_\_

If change in status, please explain: \_\_\_\_\_

Reason for replacement:  Retired  Resigned  Deceased  Other \_\_\_\_\_

Current employee to be paid through: \_\_\_\_\_ Current rate of pay (hourly) \$ \_\_\_\_\_

Status of Position to be filled:  Permanent  Temporary From: \_\_\_\_\_ To: \_\_\_\_\_

Full-time  Part-time If part-time, number of hours per week: \_\_\_\_\_

Requested Salary Range: \_\_\_\_\_ Hourly  Weekly  Monthly  Yearly

Schedule: (days/hours of work) \_\_\_\_\_

Department Head Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Human Resources Director:  Approved  Disapproved \_\_\_\_\_  
Signature Date

Finance Director:  Approved  Disapproved \_\_\_\_\_  
Signature Date

Town Administrator:  Approved  Disapproved \_\_\_\_\_  
Signature Date

### For HR use only:

Job Filled?  Yes  No Date: \_\_\_\_\_ Name: \_\_\_\_\_  
Signature Date