Wellesley College
Casual Wage/Limited Term Requisition Form

Date: ______________________________ Budget # ______ - ______ - 6151 - ______

Department: ________________________

Department Head’s Signature: ______________

Timesheet Approver: ____________________

Supervisor: ____________________________

**Type of Request:** (check one and complete the information)

___ One-time Assignment

Description of Duties:

Skills Needed:

Hours: (daily)

Start Date: _______ End Date: _______

___ Ongoing Assignment

Description of Duties:

Skills Needed:

Hours: (daily)

Start Date: _______ End Date: _______

Wage rate: _______ Position filled by: _______

Has this employee previously worked for Wellesley College in a benefits-eligible position? ______

__________________________

Human Resources Approval: ___________________________ Date: _____________