

SHRO Transaction Request Form-*Green Sheet*

1. **ADVERTISE:** *(Positions are posted to the State's website at no cost. Use remarks section for special instructions.)*
- a) TAG Dept (Present State employees of this agency.) Statewide Internal (State employees in all agencies.) Public
- Paid recruitment options. (Requires a 503 form.)*
- b) Career Builder Newspapers* Other* **List or identify in Remarks.*
- c) Closing Date: _____ Ongoing until further notice.
2. **EMPLOYEE TRANSACTIONS:** *(Requisition #, if applicable. _____)*
- a) Hire Promotion Transfer Demotion
- b) Resignation Dismissal End of Temporary Abandonment
- c) Leave of Absence *(Attach Doctor's statement, Military Orders and/or explanation): From: _____ Return: _____*
- d) Other (Specify)
3. **POSITION:** *(Position description submitted electronically and signed original attached):* Yes No
- a) New Position Reclassification Transfer Temporary Upgrade
- b) Funding: Task Group _____ Task Profile: _____ Other (Specify): _____

4. **EFFECTIVE DATE:** *(Beginning of pay period may be required)* Estimated Actual

5. **Name:** **Employee ID:**
6. **Job Title:** **Position #:** **Supv. Pos#:**
- a) Classified Unclassified **TimeSheet Approved by:**
- b) Regular Temporary w/Benefits Temporary no Benefits
- c) Full-time Part-time-% 999 hours
- d) Supervisory Confidential Union Covered _____
7. **Division:** **Dept. ID #:** **Work Phone:**
8. **Salary Range/Step:** **Salary/Hourly Wage:** **M&T _____** **Standby (opt):** Yes
9. **Shift:** **Work Schedule:** **Uses Time Keeper:** Yes
10. **Clearances Required:** Confidential (CAC ID Only) NACI-Computer Usage
- Secret Top Secret
11. **Pre-employment::** Drug Screen Physical

12. **Remarks:**

13. **MUST HAVE SIGNATURE FROM DEPT BUDGET PERSONNEL:**

Dept. Budget Approval Signature

Worksite Supervisor/Date

Division/Director/Date

SHR Director/Date