**REQUEST FORM FOR ADVERTISING A POSITION**

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| **Organisation description (OE)** |  | | | | | | **Line Manager/Delegated authority** | | | | | |  | | |
| **Details of former/current incumbent** |  | | | | | | **Date of vacancy** | | | | | |  | | |
| **Reference number** |  | | | | | | **Reason for vacancy** | | | | | |  | | |
| **Base remuneration rate** |  | | | | | | **Commencement date of duties** | | | | | |  | | |
| **Recommended Cost of Employment** |  | | | | | |  | | | | | |  | | |
| **Advertisement** | **YES** | |  | | **NO** | | **If no, provide motivation** | | | | | |  | | |
| **Strategic Recruitment** | **YES** | |  | | **NO** | | **If yes, provide cost centre for recruitment costs:** | | | | | |  | | |
| **Advertising costs**  **Relocation costs** | **SU** | **YES** | | | **NO** | | **External cost centre** | **YES** | **NO** | **External cost centre no:** | | |  | | |
| **Does your personnel plan make provision for this vacancy** | **YES** | | | | | | **NO (If no, please provide motivation by means of a written attachment to this request form.)** | | | | | | | | |
| **Indicate which employment equity statement should be used on the advert.** | | | | | | | | | | | | | | | | |
| a) The University is committed to employment equity EE, and appointments will be made in line with the EE Plan for the specific environment as well as SU’s institutional EE Plan. | | | | | | | | | | | | | | |  | |
| b) The University is committed to employment equity EE. In accordance with SU’s institutional EE Plan and that for the specific environment, only South African citizens from designated groups will be considered for appointment. | | | | | | | | | | | | | | |  | |
| c) The University is committed to employment equity EE. In accordance with SU’s institutional EE Plan and the EE Plan for the specific environment, South African candidates from designated groups will receive preference over foreign nationals where EE targets are a factor. Where EE is not a factor, South African candidates will receive preference over foreign nationals. | | | | | | | | | | | | | | |  | |
| **Members of interview panel** | | | | | | | | | | | | | | | |
| **Panel member (title, initials & surname)** | **UT number** | | | | | **Division, Department, Faculty** | | | | | **Race** | **Gender** | | **Secretary/PA** | |
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| **Line manager / Delegated authority** | | | | **Date** | | | **Dean (Academic Environments)**  **Head of Environment (Support Service)** | | | | | **Date** | | | |

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| **TO BE COMPLETED BY THE DEPARTMENT FOR THE RELEVANT POSITION (OR WHEN NEW VACANCY ARISES)**  Department: ...............................................................................................................................................................................................................................  Job title: ..............................................................................................................................................................................................................................  Certain jobs that are of a high safety risk will have to have a medical examination as a condition of employment (fitness to work). Jobs where there is potential exposure to a hazard would need an examination before employment. Please therefore complete the **job activity description** below as accurately as possible.  The costs for baseline medical testing will be covered by the Occupational Health Unit within Campus Health Services.  **NB: PLEASE ATTACH THE NECESSARY JOB DESCRIPTION TO THIS REQUEST FORM.** | | | |
| **Job activity description** | | | |
| **Will this job require:** | **Yes** | **No** | **Details (to be completed if “Yes” is selected)** |
| an essential need for accurate colour vision? e.g., work with electrical wiring, laboratory work involving subtle colour change |  |  |  |
| exposure to hazardous noise? |  |  |  |
| clinical contact with patients, or contact with human blood, blood product or human tissue? |  |  |  |
| specific physical demands? e.g., work at heights, entry into a confined space |  |  |  |
| driving a University vehicle - transporting people or hazardous goods? |  |  |  |
| driving other University vehicles? e.g., forklift trucks, tractors, ride-on mowers, cherry pickers? |  |  |  |
| food handling and the preparation of food? |  |  |  |
| exposure to other hazards, e.g., rotating machinery, electric current? |  |  |  |
| Regular night work? |  |  |  |
| Work with hazardous chemicals, e.g., pesticides, organic solvents or other chemicals? |  |  |  |
| Work with radioactive compounds? |  |  |  |
| work that may directly affect the safety of others? |  |  |  |
| travelling abroad on University business (not including attendance at symposiums, conferences and seminars)? |  |  |  |
| working with hazardous biological agents? e.g., viruses, bacteria, parasites |  |  |  |
| working with animals or insects? |  |  |  |
| working in unusual environmental conditions, or fieldwork? |  |  |  |
| working with lasers or laser equipment? |  |  |  |
| Any other hazards? |  |  |  |

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| **FOR OFFICICE USE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **MATRIX required (Yes / No)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Position number** | |  | | | | **Post level** | | | |  | | **Permanent/Temporary** | | | | | |  | | | **Full-/Part-time** | | | |  | | | **Fraction** | |  |
| **Position title** | | | | | | |  | | | | | | | | | | | | | | | | **Job family no.** | | | |  | | | |
| **Primary position no.(where required)** | | | | | | |  | | | | | | | | | | **Transfer funds from position no.** | | | | | | | | | |  | | | |
| **Payroll** | | | | | | | **Salary** | | | **SUSPI** | **Dictionary** | | | | **Vigs Action** | | | | | **Academic/Support** | | | |  | | | | | | |
| **HEMIS Prog and %** | | | **1** |  | **%** | | | | **2** |  | | | **%** | | **3** |  | | | **%** | | **4** |  | | **%** | | **5** | |  | **%** | |
| **Entity** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Cost Centre** | **Internal cost centre no.** | | | | | | |  | | | | | | **External cost centre no.** | | | | | | | |  | | | | | | | | |