

Position Management Form (General/Professional Staff)



- This form to be used for the creation of new or updating of existing GENERAL/PROFESSIONAL staff positions.
- For Academic positions use PMF-A form.
- For General/Professional staff applications for reclassification please use the separate Application for Reclassification Form (RECL-G).

Please insert a \checkmark in the relevant box below

<input type="checkbox"/> NEW position			
<input type="checkbox"/> UPDATE to existing position (e.g. title change, extension of cease date, change in reporting line)			
<input type="checkbox"/> ADDITIONAL position number for an existing position description			
<input type="checkbox"/> CLOSE position			
Effective Date	<i>Commencement Date of New position/ Effective Date of changes to existing position</i>		Cease Date
			<i>Position Cease date if fixed term</i>
Rationale	<i>Please provide rationale for the creation of new position/change to existing position (further detail can be attached in separate document, if required). Note: Reclassification rationale to be provided in Addendum (form RECL)</i>		
School/Area			
Faculty			
	PROPOSED NEW POSITION/CHANGED POSITION DETAILS	EXISTING POSITION DETAILS	
Position Number	<i>(HR to create position no. if NEW)</i>	<i>Please insert existing position number:</i>	
Position Title:	<i>New/Revised position title:</i>	<i>Existing Position Title:</i>	
Reports to position	<i>Title of position which this position is to report to (or name of manager):</i>	<i>Title of position which the position currently reports to (or name of manager):</i>	
Reports to Position Number	<i>Position Number of 'reports to' position. If also new, write 'NEW':</i>	<i>Position number of existing reports to position:</i>	
HEW Level	<i>Proposed HEW Level:</i>	<i>Current HEW Level:</i>	
Total number of positions required		Work requirements (e.g. licenses, physical fitness)? Please specify:	
Mode of Employment <i>(please \checkmark relevant):</i>	<input type="checkbox"/> Continuing	<input type="checkbox"/> Fixed Term	<input type="checkbox"/> Curtin Research Contract (CRC)
Location	Campus:	Location (Building No.):	Room Number:
Incumbent(s)			Incumbent staff ID
C Level Code	C Level Description	Short C Level	
Funding			
Cost Centre	% of Funding	Funding Type	
Name of person submitting request:			Contact No.:
Authorisation			
Position Title	Name	Signature	Date
Cost Centre Manager or nominee			
Head of School/Area			
Faculty Business Manager/Executive Manager or nominee			