

Agronomy New Employment Checklist

If you are planning to hire someone, this is the form to fill out to make sure everything is in order before starting the process.

Filling in the information below will help to avoid some of the common issues that arise in the hiring process.

Hiring Manager

LAST NAME

FIRST NAME

EMAIL

PHONE NUMBER

Position Information

PROPOSED POSITION TITLE

EMPLOYMENT TYPE

HOURS PER WEEK
(IF PART TIME)

PROPOSED START DATE

Use format MM/YYYY

PROPOSED END DATE

Use format MM/YYYY

PROPOSED BASE SALARY

SOURCE OF FUNDING

ACCT #	PERCENTAGE OF SALARY	GRANT START DATE	GRANT END DATE

0

BACKGROUND CHECK ACCOUNT

**Submit to
Lisa McEnaney**

MAIN OFFICE USE ONLY

Pre-Position Check

MICHELLE MILLER

**Send to
Accounting**

DEBRA HOP

**Send to
Dept. Chair**

KENDALL LAMKEY

**Send to
Local HR**

Pre-LOI Validation

MICHELLE MILLER

**Send to
Accounting**

DEBRA HOP

**Send to
Dept. Chair**

KENDALL LAMKEY

**Send to
Local HR**