

CITY OF NEWTON
JOB OFFER AUTHORIZATION
(REV NOV 2022)

Title of Position:		Department:	
Position # in Munis:		Previous Incumbent:	

STATUS OF POSITION: *Check all that apply.*

- | | | |
|---|--|---|
| <input type="checkbox"/> New Position
<input type="checkbox"/> New FTE through budget, approved by the Council
<input type="checkbox"/> Title change of existing FTE (Position Control Form must be submitted)
<input type="checkbox"/> FTE repurposed, moved to new division w/in dept. (Position Control Form must be submitted) | <input type="checkbox"/> Existing Position
<input type="checkbox"/> Permanent
<input type="checkbox"/> Temporary
<input type="checkbox"/> Seasonal
<input type="checkbox"/> Full-time
<input type="checkbox"/> Part-time, 20+ hours, benefit eligible | <input type="checkbox"/> Part-time, less than 20 hours, not benefit eligible
<input type="checkbox"/> Civil Service
<input type="checkbox"/> Non-Civil Service
<input type="checkbox"/> Non-Union
<input type="checkbox"/> Union, Local # _____ |
|---|--|---|

BUDGET INFORMATION: *Please complete the following section regarding impact on the budget.*

- Is this position currently budgeted for/listed in the budget book:
 Yes No

- If this position is **not** currently budgeted for/listed in the budget book, what vacant position will be used to fill the position listed above?

Position Title to be repurposed	Position # in Munis	Previous Incumbent

- What funding will be used to cover salary costs for this repurposed position? _____

CANDIDATE RECOMMENDATION: *Please list the selected candidate information below.*

Candidate Selected:	
Internal (current) or External Candidate:	
Candidate email address:	
Grade and Step Recommended:	
Salary:	
Number of hours per week:	
Proposed Start Date:	
Interviewers:	
Department Head Signature:	

APPROVALS:

Director of Human Resources

Comptroller of Accounts (or designee)

Chief Financial Officer

Mayor