HIRING REQUEST FORM

Please attach comprehensive JD (format on next page) to this form before sending for approval

Name of Department: ……………………………

Designation: ……………………………

Date of Requisition: ……………………………

No. of Positions to be filled: ……………………………

Grade: ……………………………

Position as per Headcount Plan?

Yes

No

System needs

Laptop

Desktop

New laptop/desktop needed\*

Yes

No

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**Department Head Signature**

**Name:**

**Date:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Division Head Signature**

**Name:**

**Date:**

 **\*If new Laptop/Desktop is needed, CEP form must be attached with this form.**

**---------------------------------------------------------------------------------------------------------------**

HR SECTION

Position mentioned in structure: ……………………………

Position planned for in Headcount Plan: ……………………………

Date Approved: ……………………………

Signatures: ……………………………

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**Department Head Signature**

**Name:**

**Date:**

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**Department Head Signature**

**Name:**

**Date:**

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**Division Head Signature**

**Name:**

**Date:**

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**Name:**

**Date:**

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**Division Head Signature**

**Name:**

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**Name:**

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**Name:**

**Date:**