# Recruitment Request Form (RRF)

**Recruitment Request Form (Confidential)**

**(This form must be submitted to HR for all resourcing requirements)**

**PERSONAL DETAILS**

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| EMPLOYEE NAME: | | |
| MOBILE NO. | | TELEPHONE NO. |
| EMAIL: | | |
| ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **CONDITIONS PRECENDENT – Completed by HR** | | |
| GARDA VETTING: YES / NO / NA | QUALIFICATION EVIDENCE: YES / NO / NA | |
| SATISFACTORY REFERENCES X 2: YES / NO / NA | PRE-EMPLOYMENT MEDICAL: YES / NO / NA | |
|  | | |
| **ROLE DETAILS – Completed by Manager** | | |
| POSITION TITLE: |  | |
| LINE MANAGER: |  | |
| DEPARTMENT: |  | |
| JOB DESCRIPTION / DUTIES (attach): |  | |
| CONTRACT COMMENCEMENT DATE: |  | |
| CONTRACT COMPLETION DATE  (if fixed term temporary): |  | |
| **\*Contract Renewal – Required**  Employee Original Start Date: |  | |
| How many contracts has the Employee Received? |  | |
|  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **CONTRACT TYPE DETAILS – Completed by Manager** | | | |
| **Contract Types** | | **Tick Yes/No, and additional detail if required** | |
| 1. Permanent | Yes / No | Full-time (i.e. norm 35hrs/week): | Yes / No |
| 1. Permanent – Term time | Yes / No | Part-time: (i.e. less than 35hrs/week):  (Please indicate total number of hours) | Yes / No |
| 1. Fixed-term - Temporary | Yes / No | **Other Details?:** | |
| 1. Fixed-term – Temporary – Term time | Yes / No |
| 1. Specific Purpose - Temporary | Yes / No |
| 1. Letter of Engagement | Yes / No |
| 1. Independent Contractor | Yes / No |

|  |  |
| --- | --- |
| **WORKING HOURS DETAILS – Completed by Manager** | |
| 1. DAYS OF WORK (Mon-Fri): |  |
| 1. START TIME (norm 9:00 a.m.): |  |
| 1. FINISH TIME (norm 5:00 p.m.): |  |
| **REST PERIODS:** | A) MORNING BREAK (paid): |
| B) LUNCH BREAK (unpaid): |
| C) AFTERNOON BREAK (paid): |
| D) Other – please specify |
| **Comments:** | |

**REMUNERATION DETAILS – Completed by Manager and HR**

|  |  |  |
| --- | --- | --- |
| **SALARY:** | ***Tick Yes/No, and additional detail if required.*** | |
| HOURLY RATE: | YES / NO |  |
| DAILY RATE: | YES / NO |  |
| WEEKLY RATE: | YES / NO |  |
| ANNUAL RATE: | YES / NO |  |
| PRO-RATA’D RATE: | YES / NO |  |
|  | | |
| **APPROVAL DETAILS** | | |
| **SIGNED BY:** | **SIGNATURE(s)** | **DATED:** |
| 1. LINE MANAGER: |  |  |
| 1. H.R. MANAGER: |  |  |
| 1. DIRECTOR OF OPERATIONS: |  |  |
| 1. PRESIDENT: |  |  |
|  | | |
| **ADDITIONAL INFORMATION AND COMMENTS:** | | |
|  | | |
| **Update Payroll**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Update Departments:** Facilities / IT / Bright HR / Maintenance / Reception / Marketing / Data Protection – New Employees / Other | | |