

# **TEMPORARY HELP REQUEST FORM**

*Please complete the following form with the required skill, abilities and experiences necessary to perform the position in question.*

**Position Title:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Immediate Supervisor:** \_\_\_\_\_

**Expected Start and End Dates of Assignment:** \_\_\_\_\_

**Expected Hours of Assignment:** \_\_\_\_\_

**Requirements of Position:** (Please describe computer, interpersonal, organizational, etc. skills and level of experience necessary. **Note:** The position questionnaire could be a resource for you in completing this form.)

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