



OFFICE OF
ACADEMIC AFFAIRS
Indiana University South Bend

Job Posting Information Form

This completed form is to be submitted when the unit files for a job to be posted. The information provided on this sheet will be used to draft the job posting that is being requested. Please attach additional sheets if necessary.

Submitted By: _____

Campus: _____

School/RC: _____

Department: _____

Location: _____

FTE: _____

Appointment Status: _____

Title (Example: Clinical Associate Professor of Nursing, Assistant Professor of Mathematics, Lecturer of Fine Arts, etc)

Position: _____

Salary Grade: _____

Salary Range: _____

Part Time Position: _____

Visiting Position: _____

Expected Start Date: _____

Search Scope: _____

Waiver Request (Yes/No) : _____

Desired Posting Date: _____

Text of Vacancy Announcement:

Required Basic Qualifications:

Preferred Basic Qualifications:

Additional Qualifications (If Any):

Department Contact for Questions:

Name: _____

Email: _____

Salary and Rank: _____

Special Instructions (If Any):

Best Consideration Date: _____

Search Committee Members (Name and Email)

Committee Member 1 (Chair)

Name: _____

Email: _____

Committee Member 2

Name: _____

Email: _____

Committee Member 3

Name: _____

Email: _____

Committee Member 4

Name: _____

Email: _____

Committee Member 5

Name: _____

Email: _____

Additional Information (If Any)