



CANDIDATE JOB OFFER APPROVAL FORM

Candidate Information

Candidate Name _____ Job Title _____
Department _____ Manager _____
Approx. Start _____ Wage/Salary: _____

Reason for Hire:

☐ Additional Personnel
☐ Replacement Personnel Who Left/When? _____

Miscellaneous

Action Items	Status
<input type="checkbox"/> Planned Time Off _____ _____ _____	Approved / Denied
<input type="checkbox"/> Other Requests _____ _____ _____ _____	Approved / Denied

Comments/Notes

President Signature

Date