**UNIVERSITY OF MINNESOTA CROOKSTON**

**Request to Make Job Offer**

This form is to be completed by the hiring authority and sent to Director of Human Resources. Approval must be obtained prior to making a job offer.

Name of Candidate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hiring Leader

Department

Job Title

Proposed Start Date

Proposed Staring Salary

Remarks: *Describe any special circumstances that may be part of the offer (relocation expenses, tenure, campus housing, delayed start date, immigration status/work authorization, etc.)*

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