



Revised: 2/28/2022

Regents Service Program Employment Funding Proposal 2022-2023

OFFICE USE ONLY

This form must be submitted by March 31st, 2022

SECTION 1: EMPLOYER INFORMATION

Department: _____
Address: _____
Contact Name: _____ Phone Number: _____
E-Mail: _____ Fax: _____

Personnel Contact: _____ Phone Number: _____
E-Mail: _____ Fax: _____

SECTION 2: POSITION INFORMATION

Title of Position: _____
Number of **Undergraduate** Positions Requested: _____ Number of **Graduate** positions requested: _____
Is the position related to K-12 Literacy Programs? Yes No

Position's Direct Supervisor Name: _____
Direct Supervisor's Title: _____
E-Mail: _____

Location where work will be performed: _____

Indicate the duration of the program by checking one of the following: Fall 2022 Spring 2023 Academic Year

SECTION 3: POSITION DESCRIPTION AND REQUIREMENTS

1. List the four primary tasks and responsibilities to be performed, then indicate the percentage of each.

Task/Responsibility #1: _____ %

Task/Responsibility #2: _____ %

Task/Responsibility #3: _____ %

Task/Responsibility #4: _____ %

CONTACT INFORMATION

Ashley Salisbury

E-Mail: asalisbury@unr.edu

Fax: (775) 784-1025



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POSITION DESCRIPTION AND REQUIREMENTS (CONTIUNED)

2. Required Skills and/or Qualifications:

3. Preferred Academic Major: _____

4. Coursework or degree pre-requisites:

5. In the space provided, explain how this placement will enhance the student employee record of accomplishment and responsibility in the areas consistent with their career or academic objectives (*not to correlate with ways a general Work Study or student worker position would enhance a student resume*).

6. In the space provided, explain how or what this position will contribute to the State of Nevada, the community, and/or the University. Specifically identify the population to be served by this position and the number of individuals expected to be served by each employee.



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SECTION 4: ASSESSMENT

In the space provided, list and explain 3-5 specific measures you will use to assess the impact your program has had for the student employee and the population served (*Reference numbers 5 and 6 above*).

Note: Annual reports must include a summary of assessment results.

SECTION 5: BUDGET

Minimum annual dollar amount needed to implement program: _____

Maximum annual dollar amount requested: _____

Specific items/amounts included in budget:

SECTION 6: CERTIFICATION

I certify that the information provided above is an accurate and complete description of the position(s) I am proposing. I understand that the submission of this proposal does not guarantee approval. I certify that positions hired with these funds will not be used to provide course instruction.

Employer's Signature: _____ **Date:** _____

Submit Proposals To:

Ashley Salisbury

E-Mail: aslisbury@unr.edu

Campus Mail: Mail Stop 0076

Fax: (775) 784-1025

CONTACT INFORMATION	Ashley Salisbury	<u>E-Mail:</u> asalisbury@unr.edu	<u>Fax:</u> (775) 784-1025
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