

|  |  |  |                                    |                                |
|--|--|--|------------------------------------|--------------------------------|
| <b>To: Human Resources Dept.</b>   |  | <b>From :</b> _____  | <b>Date:</b> _____                 |                                |
| <b>Please identify suitable candidate to fill the following Vacancy:</b>           |  |  |                                    |                                |
| <b>Position/Title:</b> _____   | <b>Grade &amp; Level:</b> _____                                  | <b>Div/Dept:</b> _____   | <b>Location:</b> _____             |                                |
| <b>Reports to:</b> _____   | <b>Date Required by:</b> _____<br><b>No of candidates:</b> _____ |  |                                    |                                |
| <b>Job Summary:(Refer to Job Description)</b>                                      |  |  |                                    |                                |
| <b>Minimum Work Experience/Knowledge Requirements:</b>                             |  |  |                                    |                                |
| <b>Requirements</b>  |  |  |                                    |                                |
| <b>Education(Specify):</b>   |  |  |                                    |                                |
| <b>Professional Qualification(Specify):</b>  |  |  |                                    |                                |
| <b>Nationality:</b>  |  | <input type="checkbox"/> Local                                     | <input type="checkbox"/> Arabs     | <input type="checkbox"/> Other |
| <b>Languages:</b>  |  | <input type="checkbox"/> Arabic                                    | <input type="checkbox"/> English   | <input type="checkbox"/> Other |
| <b>Experience</b>  |  | <input type="checkbox"/> Essential                                 | <input type="checkbox"/> Desirable |                                |
| <b>Position:</b> <input type="checkbox"/> New <input type="checkbox"/> Replacement |  | <b>Result of Transfer/Promotion/Termination</b>                    |                                    |                                |
|  |  | (All new roles require DHR Sign: _____ )      Name of Leaver _____ |                                    |                                |
| <input type="checkbox"/> Budgeted <input type="checkbox"/> Not Budgeted            |  | Gross Salary _____   |                                    |                                |
|  |  | (Require MD Signature: _____ )                                     |                                    |                                |
| <b>Requested by:</b>   |  |  |                                    |                                |
| <b>Date:</b> _____   |  |  |                                    |                                |
| <b>Position:</b> _____   |  |  |                                    |                                |
| <b>Name:</b> _____   |  |  | <b>Date:</b> _____                 |                                |
| <b>Signature:</b>  |  |  |                                    |                                |
| <b>HR Only</b>   | <b>Role Filled by</b>  | 1.) _____  | DOJ                                | 1.) _____                      |
|  |  | 2.) _____  |                                    | 2.) _____                      |
|  |  | 3.) _____  |                                    | 3.) _____                      |
|  |  | 4.) _____  |                                    | 4.) _____                      |