

COOK COUNTY BUREAU OF HUMAN RESOURCES INTERIM ASSIGNMENT REQUEST FORM

Initial Request Reque	est for Extension
If request is for an extension, what was the initial term	of the original Interim Assignment?
Provide the following regarding the proposed Interim A	ssignment Position:
Title:	
Grade: Rate of Pay:	Position ID:
Reason position is currently vacant:	
Date vacancy began, if known:	
Estimated date vacancy is expected to end:	
Is the employee who previously held the position on a	Leave of Absence and expected to return?
Yes N	lo
If yes, when is return anticipated?	
What, if any, steps have been taken to fill the position?	
Additional information in support of this request:	

Provide the following information regarding	g the employee you propose to fill the Interim Assignment:
Name:	
Current Title:	
Current Department:	
Grade: Rate of Pay:	Position ID:
Proposed Start Date:	Anticipated End Date:
Required Attachments:	
 Job description of Interim Assignme Resume, copies of diplomas, licens employee proposed to fill Interim As 	es, certifications and/or other qualifying documentation of
EMPLOYEE AND D	DEPARTMENT HEAD(S) CERTIFICATION
	elect for this Interim Assignment possesses all of the minimum requirements on srequest is in compliance with the Interim Assignment Policy and Employmen
that I am aware that I am strictly prohibited from condition employment of hiring upon or because of any politic cooperating with or threatening any act which is proscrib best of my knowledge, Political Reasons or Factors did	the Cook County Board President that are not exempt under Shakman, I certify the control of the county bear of the county and the county are control of the county and the county are control of the county and the county are control of the county are county are county and county are county and county are county and county are county and county are county are county and county are cou
Print Name:(Employee)	Signature:
Title:	Date:
Print Name:(Department Head requesting assignment)	Signature:
Title:	Date:
Print Name:(Department Head of department in which requested em	Signature:ployee works, if different)
Title	

FOR BUREAU OF HUMAN RESOURCES USE ONLY		
BHR DETERMINATION		
Disposition of Request: Approved Denied		
Chief of BHR:	Date:	
Disposition of Request: Approved Denied		
Compliance Officer: (In the event of disagreement, the Compliance Officer's decision will go	Date:vern.)	
BHR CHIEF CERTIFICATION		
With respect to all County jobs under the jurisdiction of the Cook County Board President that are not exempt under Shakman, I certify that I am aware that I am strictly prohibited from conditioning, basing or knowingly prejudicing or affecting any term or aspect of County employment or hiring upon or because of any political reason or factor or knowing inducing, aiding, abetting, participating in, cooperating with or threatening any act which is proscribed above. I certify, under penalty of perjury, as provided by the law that, to the best of my knowledge, Political Reasons or Factors did not enter into any County Employment Actions taken with respect to the above Interim Assignment Request or the employment or hiring process. I understand that failure to comply with the above prohibitions may result in sanctions, including disciplinary action up to and including termination and may subject me to criminal prosecution.		
Print Name:	Signature:	
Title:	Date:	