

# NORTHWESTERN UNIVERSITY

## Position Data Form

Form Print Date:

Univ Title:  Posn #:  Incumbent:

**Position Information**

Effective Date: A  B   
 Action/Reason:   Position Status:

**Job Information:**

Job Code:  Dept Title:

**Work Location**

Department #:  Std Hours: A  B  Reports To:  Location:

**NW Position Data**

Position End Date:  **OR** Check here if Indefinite End to Position:

Comment:

Position Type:  Posn Category:  Sched Pay Periods:  % Full Time:

Tenure Track:  Y / N Salary Admin Unit:

**Information**

Max Head Count:  Budgeted Salary:

**NW Position Distribution (Current Funding)**

Perc	Fund	FN Dept	Project	Act	Prog	Chart Field	Account	Start Date	Stop Date
*							60040		

**Previous Funding**

Perc	Fund	FN Dept	Project	Act	Prog	Chart Field	Account	Start Date	Stop Date

Authorization Name(Print)	Authorization Name(Signature)	Phone	Date

