

Direct Questions and Form Submission to Staff Employment Services ucmjobs@ucmerced.edu 209-228-8247

Candidate may not begin work until final approval has been received for this request.

Name of Candidate: _____ Hiring Department: _____
Vacancy Number: _____ Position Title: _____
Name and Title of Current Relative in the Department: _____

Describe the type of working relationship (based on PPSM21) in your recommendation for hire:

NOTE: Near relative--spouse, domestic partner, parent, child, or sibling, an in-law or step-relative, or aunt or uncle, in one of these relationships. Also, a relative of a domestic partner in one of these relationships or a person residing in the same household as the employee or the familial, or changes to work relationship of two current employees so that the employees become near relatives in the same department.

Describe how the employment of the near relative in the same department is in the best interests of the University:

Does the proposed new hire have unique qualifications for this position to support the employment of a near relative request?

Yes No If yes, list the unique qualifications:

Describe any recruitment efforts made to find other suitable candidates:

Identify the recruitment and selection process involved including selection panel members, special skill requirements, and any other information to support your recommendation for hire

Number of applications received: _____

Will the proposed new hire report directly to the other near relative? Yes No

Will the proposed new hire report to the same supervisor as the other near relative? Yes No

Will the proposed new hire work in the same location, or in close proximity to, the other near relative? Yes No

Will the proposed new hire work in a separate location? Yes No

Will either near relative have the ability to influence the salary, promotion, reclassification, performance evaluation, merits, and/or disciplinary actions of the other? Yes No If yes, explain:

Will either near relative have the ability to approve expenditures made by or payments made to the other?

Yes No If yes, explain:

Will any other financial controls be compromised through potential joint actions? Yes No If yes, explain:

What reasonable safeguards will be implemented to protect against conflicts of interest involving appointment of these near relatives in the same department?

Hiring Authority and Title Date

Human Resources Approval Date

Dean/Vice Chancellor Approval Date

Chancellor Approval Required (PPSM21.G) Date

cc: Department Personnel File –and– Human Resources Central Personnel File for EACH near relative employee named in this request