Request to Interview - Exempt (EEOR-2)

Check one: 🗌 Faculty 🗌 Librarian	
Date: Contact Name:	Contact Phone:
Department Name: Open	Position Title:
Name of Previous Employee:	

Names of Finalists

List in rank order those candidates for whom you are requesting permission to interview, noting those that are alternates. Attach copies of their vitas or resumes.

Name	Race*	Gender*	Meet AA Goal?*
1.			
2.			
3.			
4.			
5.			
6.			
7.			
*Co	mpleted by th	e Office of	Institutional Equity

Applicant Pool Information *

1.What was the total number of applicants reviewed for this position?*____

2. How many applicants for this position did not meet minimal qualifications?*

Statistical Description of Applicant Pool *

*Completed by the Office of Institutional Equity

Ethnic Group	White (not of Hispanic origin)	Native American/ Alaskan Native	Black/African American	Asian/Pacific Islander	Hispanic	Multiracial	Race Unknown	Total
Males								
Females								
Sex Unknown								
Total								

Section D: Required Signatures

1. Hiring Supervisor	Date	4. Director, OIE	Date
2. Department Head	Date	5. Vice Chancellor	Date
3. Dean	Date	6. Chancellor	Date

FORT WAYNE