



Offer Letter Request Form

Date: _____

Candidates Name: _____

Address: _____

City : _____

State: _____ Zip Code: _____

Phone Number: _____

Email Address: _____

Job Title: _____

FLSA Status: Exempt ☐ Non Exempt: ☐

☐ Full-Time ☐ Part-Time # hours per week

☐ Temporary ☐ On-Call

Salary: Hourly Rate: _____ Annual Salary: _____

Start Date: _____ Time: _____

Reporting Manager: _____

Location Address: _____

Manager/Supervisor/Director Signature: _____

Date: _____

HR ONLY: Date Processed: _____ Processor's Signature: _____

*** Please do not leave any spaces blank. All information will be used to generate the offer letter.