

AUTHORIZATION TO FILL A CLASSIFIED POSITION

DATE:

DEPARTMENT:

POSITION TITLE and CLASSIFICATION:

PERSON REPLACED (Please note if this is a NEW position):

REASON FOR FILLING:

DESCRIPTION OF DUTIES (add separate sheet if necessary):

QUALIFICATIONS (add separate sheet if necessary):

SCHEDULE (work days, hours, months per year):

BUDGET POSITION NUMBER:

POSITION INDEX CODE (account number to be charged for payroll purposes):

SOURCE OF FUNDING (for new position):

CONTACT PERSON:

PHONE #:

FAX #:

AUTHORIZATION (As applicable):

Unit Supervisor/Chair

DATE

Dean/Executive Director/Director

DATE

Vice President/President

DATE

To be completed by Human Resources and OEEO:

JOB GROUP	GENERIC CODE	UNDER-UTILIZATION		GOALS	
		<u>Minority</u>	<u>Female</u>	<u>Minority</u>	<u>Female</u>

OEEO comments:

OEEO Representative _____

Date _____