

This form is used when requesting the creation of a new position. Complete this form and attach the signed, finalized Position Description from the on-line Position Description tool.

INSTRUCTIONS:

- Part A & B:** Supervisor completes, signs, and forwards to Department Chair, Head, or Center/Institute Director.
- Part C:** Department Chair, Head, or Center/Institute Director reviews Part I and a) approves/denies creation of the new position and b) determines appropriate funding. If approved, forward to Dean, Director, Assistant or Associate Vice President, or Vice Provost. If not approved, return to supervisor and forward copy to Human Resources.
- Part D:** Dean, Director, Assistant/Associate Vice President, or Vice Provost review Parts I & II and a) approves/denies creation of the new position and b) determines appropriate funding. If approved, forward to Vice President for Administration & Government Affairs, Vice President for Development, Vice President for Finance and Administration, Vice President for University Relations, President, or Provost. If not approved, return to supervisor and forward copy to Human Resources.
- Part E:** Vice President for Administration & Government Affairs, Vice President for Development, Vice President for Finance and Administration, Vice President for University Relations, President's Office, or Provost's Office indicate approval of request and concurrence of funding source. If approved, forward to Human Resources. If not approved, return to Dean, Director, Assistant/Associate Vice President, or Vice Provost, and forward copy to Human Resources.
- Part F:** Initial Budget Approval
- Part G:** ORSP Approval
- Part H:** HR Evaluation Results
- Part I:** Final Budget Approval

Part A: Hiring Department Supervisor – Please provide the following information:

Do Not Post because position may be filled with an internal candidate within the same department.

Proposed Title:	Position Number:	
Department:	Stem:	
Supervisor/Title:		
Months Per Year:	Hours Per Week:	Overall FTE:

List the reasons for creation of this new position:

- 1.

- 2.

Signature:	Date:
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STAFFING ALTERNATIVES

Check Yes or No	Staffing Alternative	Explanation
<input type="checkbox"/> Yes <input type="checkbox"/> No	Assigning duties to other positions or departments (such as reassignment to be done in concert with other manager, if appropriate)	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Implementing job sharing	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Stopping, reducing, or delaying other department activities	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Implementing alternative schedules that will reduce costs	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Using work-study and wage employees; temporary agency services may also be appropriate for short term staffing needs	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Leveraging technology	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Other	

Part B: Hiring Department Supervisor – Please check all boxes that apply:

- A departmental account has sufficient funds to cover the cost of this new position (Index # _____)
- The department does not have sufficient funds to cover the cost of this new position.
 - Any required funding will come from (please check one and supply account number):
 - Department (Index # _____)
 - Vice President or Provost (Index # _____)
 - The funding will come from: _____
(Account Number/Name)

This position is funded by: Soft dollar funding Hard dollar funding

Signature: _____

Date: _____

Part C: Department Chairperson, Head, or Center/Institute Director (check all appropriate boxes):

- I approve creation of this new position.
- A departmental account has sufficient funds to cover the cost of this new position.
- The department does not have sufficient funds to cover the cost of this new position.

The funding will come from: _____
(Account Number/Name)

Signature: _____

Date: _____

Part D: Dean/Assistant or Associate Vice President/Vice Provost (check all that apply):

- I approve creation of this new position.
- A departmental account has sufficient funds to cover the cost of this new position.
- The department does not have sufficient funds to cover the cost of this new position.

The funding will come from: _____
(Account Number/Name)

Signature: _____

Date: _____

Part E: Provost/President/Vice President (check all that apply):		
<input type="checkbox"/> I approve creation of this new position. <input type="checkbox"/> A departmental account has sufficient funds to cover the cost of this new position. <input type="checkbox"/> The department does not have sufficient funds to cover the cost of this new position. The funding will come from: _____ (Account Number/Name)		
Signature		Date:
Part F: Initial Budget Office Approval:		
<input type="checkbox"/> The budget identified above has sufficient funds for this evaluation. <input type="checkbox"/> The budget identified above does not have sufficient funds for this evaluation. The approval from Budget is valid for one month after the date below. If the approvals take longer than one month from the date of the signature below, a second Budget approval is needed.		
Signature:		Date:
Part G: ORSP Approval:		
<input type="checkbox"/> The budget identified above has sufficient funds for this evaluation. <input type="checkbox"/> The budget identified above does not have sufficient funds for this evaluation.		
Signature:		Date:
Part H: HR Position Evaluation Results:		
<input type="checkbox"/> Exempt Hiring Range:	<input type="checkbox"/> Nonexempt Hiring Range:	Grade:
New Position Title:		
Signature:		Date:
Part I: Final Budget Approval:		
<input type="checkbox"/> The budget identified above has sufficient funds for this evaluation. <input type="checkbox"/> The budget identified above does not have sufficient funds for this evaluation.		
Signature:		Date: