



## REQUEST TO FILL

ALL POSITIONS

[non-Faculty]

### Instructions

Complete this form in order to 1) fill vacant positions (straight replacement), 2) request new positions, or 3) fill vacant positions while also making changes to the existing position. All requests subject to approvals.

Please include the job description with this request.

Date: _____	<input type="checkbox"/> New Position	<input type="checkbox"/> Replacement (no changes)	<input type="checkbox"/> Replacement (with changes)
Classified: <input type="checkbox"/> CSEA	<input type="checkbox"/> Confidential	<input type="checkbox"/> Mgmt/Supv	<input type="checkbox"/> Educational? (Ed Code § 87002)

Department: \_\_\_\_\_ Supervisor's Title: \_\_\_\_\_

	Current	Proposed/New
Classification/Title:		
Previous Incumbent:		
ESCAPE Position #:	(HR Use)	
Date Position Vacated:		
Hours per week:		
Months per year:	<input type="checkbox"/> 12 mos - <input type="checkbox"/> 11 mos - <input type="checkbox"/> 10 mos - <input type="checkbox"/> 9 mos If less than 12 months, please list the non-duty month(s): _____	<input type="checkbox"/> 12 mos - <input type="checkbox"/> 11 mos - <input type="checkbox"/> 10 mos - <input type="checkbox"/> 9 mos If less than 12 months, please list the non-duty month(s): _____
Site:	<input type="checkbox"/> MPC <input type="checkbox"/> MEC <input type="checkbox"/> PSTC	<input type="checkbox"/> MPC <input type="checkbox"/> MEC <input type="checkbox"/> PSTC
Salary Range:		
Workspace Identified:	Yes <input type="checkbox"/> Location: _____ No <input type="checkbox"/> Reason: _____	
Total Annual Cost:	(HR use) \$	(See bottom of next page.)

Funds:  General  Categorical  Grant From: \_\_\_\_\_ To: \_\_\_\_\_

Budgeted:  Fully Budgeted  Requires Additional Funding

(Filled out by Hiring Manager)

Budget	Fund	RESP	S	ACT	DEP	OBJ	LOC	FS	DET	%	Budgeted Amount
Salary Distribution:	-	-	-	-	-	-	-	-	-	%	%
	-	-	-	-	-	-	-	-	-	%	%
	-	-	-	-	-	-	-	-	-	%	%
										100%	
Overtime Distribution:	-	-	-	-	-	-	-	-	-	%	
	-	-	-	-	-	-	-	-	-	%	

The order for routing this request for approval is listed on the next page. Placement on the agenda with participatory governance groups is for information, not approval.



REQUEST TO FILL

<b>Recruitment Information</b>	Desired Start Month: _____
Desirable Qualifications:	
Suggested Advertisement Source(s):	
If requesting changes to the position, provide the justification/rationale. Also, describe consequences of not making the change.	
Bilingual Required? (If so, please provide brief explanation, including estimate of frequency) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is local travel required? <input type="checkbox"/> Yes <input type="checkbox"/> No	

1. Area Mgr/Dean Review: Name \_\_\_\_\_ Date: \_\_\_\_\_
2. Area VP Review: Name \_\_\_\_\_ Date: \_\_\_\_\_
3. AAAG/ASAG/SSAG Review Date: \_\_\_\_\_
4. Budget/AS Review: Name \_\_\_\_\_ Date: \_\_\_\_\_
5. HR Review: Name \_\_\_\_\_ Date: \_\_\_\_\_

*CSEA Position? HR will meet and confer along with an administrator from the area.*

6. Cabinet Review Date: \_\_\_\_\_
7. PAG Review Date: \_\_\_\_\_

If the new or changed position is vital to the core mission of the college, the Superintendent/President may authorize action without completing this process and will inform the President’s Advisory Group (PAG).

New job descriptions, job description changes, and concomitant salary must be approved by the Board of Trustees before the position is advertised.

BREAKDOWN OF ANNUAL COSTS	
(HR Use)	
<b>Annual Salary</b>	\$
<b>Roll-Up Costs</b> (STRS/PERS, FICA, UI, W/C, etc.)	\$
<b>Benefits</b>	\$
<b>Total Cost of Position</b>	\$