 **REQUEST TO FILL A NON-INSTRUCTIONAL POSITION**

This form is to be used to request approval to fill non-instructional permanent, temporary, new or replacement positions.

When submitting the form, a job description must be attached. Once the position has been approved by the Cabinet, the position will be posted to jobs.athens.edu by the Office of Human Resources.

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| --- | --- | --- | --- |
| **OVERVIEW** | | | |
| Academic Year |  | | |
| Contact Name |  | | |
| Contact Email |  | Contact Phone |  |

**Position Information / Justification (to be completed by the appropriate supervisor)**

Department:

Fund:

Current Position Title:

Position Number:

Is funding budgeted for this position?  Yes-Budgeted  No-Unbudgeted

Is it grant funded?  Yes  No If it is grant funded, is it benefits eligible?  Yes  No

If it is benefits eligible from a grant, what are the eligible benefits?

**Type of Position**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Position Reports to : | | | | | |
| New | Anticipated Start Date: | | | |  |
| Replacement | Position Vacancy Date: | | | | Anticipated Start Date: |
| Replacement with Modifications | Title of Position Vacated:  Title of Position Proposed:  Position Vacancy Date:  Anticipated Start Date: | | | | |
|  | | | | | | |
| Name of Staff Being Replaced: | | | | | |
| Position Status: | | Full-Time |  |  | |
|  | | Part-Time | Hours |  | |
|  | | Temporary | Hours |  | |
| Estimated Salary: | |  | Estimated Benefits: | $9,600 + 20% of Salary:  (for Full-Time and Part-Time) | |
|  | |  |  | 32% of Salary for Temporary: | |

Position is (check all that apply):

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Accreditation |  | Enrollment Need |  | Reorganization |  | Other |
|  | Business Continuity |  | Grant-Funded |  | Revenue Generating |  |  |
|  | Compliance/Legal |  | Health/Safety |  | Strategic Need |  |  |

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| **Justification** |
| Please provide evidence-based justification (including national or SACS standards) to justify the staffing request.  What is the impact of not filling the position? What projects/priorities/services will be impacted? |
| **Have you reviewed and exhausted alternative staffing options?** |
| \*Eliminated the work or expanded a current team member(s) role  \*Considered hiring position at a lesser FTE, salary, or classification  \*Deferred filling the position  \*Completely performed by someone else  \*Partially performed by someone else  Please provide detailed explanation: |

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| **TO BE FILLED OUT FOR BOTH NEW AND EXISTING POSITION** |
| Are there any department/unit reductions in costs or increases in revenues to offset this expense?  If yes, please explain: |

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| --- |
| Suggested Search Committee/Hiring Group: |

|  |
| --- |
| Additional Comments: |

|  |  |
| --- | --- |
| **Authorization Signatures** |  |
| Dean/Director: | Date: |
| Vice President: | Date: |
| Please forward to HR Employment Specialist for review and submission to Budget/VP Finance. | |
| Budget/VP Finance Reviewed: | Date: |
| (After budget review, please forward to HR Employment Specialist for submission to Cabinet) | |

|  |  |  |  |
| --- | --- | --- | --- |
| Cabinet:  President’s Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Approved: | Not Approved: | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**For Office Use Only**

Received in HR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Forwarded to Budget:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cabinet Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Posted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

VACA#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_