

President's Cabinet

Jahuary 19, 2021

MT. SAN ANTONIO COLLEGE Continued Funded Position (ex. Vacancy) Former Employee (if applicable): Akisha Cravens **Human Resources** Last day of employment: 03/31/2020 **REQUEST TO FILL - STAFF and ADMINISTRATIVE POSITIONS** (Attach Existing Job Description) **This form is used to gain approval prior to recruiting for a position. Instructions for completing this form are located on the back. Newly Funded Position Fiscal Year _____ Custodian Position: No Existing Job Description (Attach Draft of New Job Description) Department: ___Facilities Planning and Management- Custodial Services Confidential Supervisory Administrative Time (FTE): 100 Term (months/year): 12 **For Temporary Special Project Administrators only Work Schedule (Days, Hours): ☐ Temporary Special Project Administrator Salary Schedule (Range): (Refer to AP 7135) Background and Rationale (use back of form if additional space is Temporary Special Project Administrators can only be hired through the end of the current fiscal year. These positions can be renewed each fiscal year, for up to five (5) years maximum with a status change form. Funding From: General Fund Please list any changes in the budgeted position as described above (i.e., title, time, term, etc.). _ Please list the Account Number(s) and Budget Amount(s) that is/are being used to fund this Position. This section MUST be completed in order to provide budget for the position. 1100 625000 212000 653000 2100 Account Number(s): ___ __100_% Amount \$_ % Amount \$__ Account Number(s): ___ Funding: (check all that apply) 🗹 General Fund Unrestricted 🗌 Restricted Funds 🔲 Categorical 🔲 Grant 🔲 Temporary Annual renewal of this position is contingent upon the College's receipt of continued funding Duration (if grant/temporary funded): Beginning date: _____ End date: _____ Comments: Signatures: 4. Human Resources Signature Requesting Manager Signature Date 5. Vice President, Human Resources **★** Funding available □ Funding not available Position Number: _____ Contract Number: _____ Comments: _ Reviewed by President's Cabinet, the following action was taken on the above request: ☐ Approved to fill immediately □ Denied □ Modified If position does not have funding, provide funding directions:_____ Rationale: _____ 6. Signature of President/CEO Date