

esident's Cabinet

Continued Funded Position (ex. Vacancy) September 1, 2020_{MT}. SAN ANTONIO COLLEGE Former Employee (if applicable): **Human Resources** Last day of employment: **REQUEST TO FILL - STAFF and ADMINISTRATIVE POSITIONS** Reason for vacancy: **This form is used to gain approval prior to recruiting for a position. (Attach **Existing** Job Description) Instructions for completing this form are located on the back. Newly Funded Position Fiscal Year _____ Position: No Existing Job Description (Attach Draft of **New** Job Description) Department: Confidential Classified Supervisory Administrative Time (FTE): _____Term (months/year): _____ **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: _____ 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. Account Number(s): ______ _____% 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: Comments: ____ **Signatures:** Kequesting Manager Signature 4. Human Resources Signature Date 2. Division Vice President Signature 5. Vice President, Human Resources Date 3. Chief Compliance/Budget Officer Signature Date □ 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: Date 6. Signature of President/CEO

HR 101 - RTF Form Revised 11.2.17 LB