



### Hiring Review Justification Form

**Instructions**

This form is to be used by all departments that are requesting to fill a newly created or vacant position. It is imperative that questions 6-9 are answered in narrative format with as much detailed information as possible to support the request.

<b>Division:</b>	
<b>Department:</b>	
<b>Position Title:</b>	
<b>Position Number:</b>	
<b>Prior Incumbent:</b>	
<input type="checkbox"/> F/T <input type="checkbox"/> P/T Hrs/Week	<b>Salary Grade</b> (Admin & Staff only):

**Justification**

1. Is the position immediately critical to meeting/sustaining accreditation requirements?     Yes    No
2. Is the position immediately critical to fulfilling the department’s core mission?         Yes    No
3. Can filling the position be delayed?     Yes    No  
     If “yes”, until when?
4. Is there departmental funding available for this position?                                         Yes    No  
     How will the position be funded?    New Funding    Existing Line    Reallocated Funds
5. If the position is not filled, does it create a safety concern or compliance issue?         Yes    No
6. Describe the essential duties/functions of the position and why this position must be filled immediately.
  
7. What would be the impact if the position is not filled (i.e. describe impact within the department and if applicable, within the division and/or university)?
  
8. If applicable, explain how the duties of this position could be handled or reassigned to other staff within the department or division.
  
9. How long has the position been vacant? (If more than one month, please explain how the work has been accomplished.)

Signatures (Print Name and Sign)		Date
<b>Requested by:</b>		
<b>Vice President:</b>		

**For Committee Use Only:**    **Approved**     **Disapproved**     **Date**