UCI Human Resources

POSITION REQUEST FORM

Prior approval must be obtained prior to recruitment.

Complete form and submit to your division coordinator. Attach job description and org chart.

Submit approved forms to **positions@uci.edu** , subject " **PMRC Approval** "

				Submit approved forms	o positions@uci.eau,	subject PivikC Ap	provai
	GENERAL				BUDGET		
HS or Campus Positic	on:			Budgeted in FY23:			
Division (School/VC Unit):				- Funding Duration:			
Department Name:							
Department Conta	ct:			KFS Account:			
Dept. Contact Email:				Core Funded:	Yes	No	Split
Hiring Manager:				Consolidation:			
				Position #		Earn Code	
			POS	ITION			
Working Title:			Casuc	Appointment Type: al/restricted & temporary excluded			
				FTE %:			
Payroll Title Code:				New/Replacement:			
_				If replacement, name of			
Grade: (if applicable)				previous incumbent: If replacement, date prior			
Resubmitting:				incumbent left:			
Recruitment Type:				Other relevant details:			
			JUSTIF	ICATION			
Purpose of position: (write belo	w)						
Impact if position is not fille	d: (write below)						
How does this position repr	esent a change fro	om prior yea	r's staffing? (write b	elow)			
DIVISION APP	ROVAL			MANAGEMENT REVIEW	COMMITTEE A	PPROVAL	
Approved, with modification:							
Hiring Manager	Date	1 _					
			Approved				
Dean/Vice Chancellor/	Date	╵┍	Denied	Position Management Re	eview Committee	Date	
Associate Chancellor				Co-Chair			Rev3-9-2023