

## Office of Human Resources & Employee Relations HIRING REQUEST FOR NEW PERSONNEL HR-1

ALL FIELDS TO BE COMPLETED & FOLLOW SIGNATUR	RE NUMBERING	[ ] CMS
Department/Division:		[ ] Educational Administrator [ ] Non-Academic Administrator
Position Title:		[ ] Tenure-Track Faculty
[ ] Replacement for:		[ ] Temporary Faculty (E.C 87482)
[ ] New Position Current approved job description on file? [ ] Yes [ ] No  Justification:		
Position FTE: Months/Year (e.g. 10,	12, or other):	
Position Work Schedule: List Tentative Work Hours and Work Da	ays:	
Position Work Location: [ ] AVC Main Campus [ ] AVC Pala	mdale Campus [ ] Fox Fiel	d Other:
(Check all that apply)		
Additional Instructions/Comments:		
<b>Position Funding Information:</b> [ ] Unrestricted [ ] F	Restricted (Categorical)	
Identify restricted (Categorical) fund/grant:		
Ending Date of Funding: [ ] Unkn	nown	
Accounting/Funding Code (FOAP)		
#2 Business Services FOAP Approval: [ ] Yes [ ] No	τ.	. 16
FOAP Approver Correction/Comment	Ini	tial/Signature
#1 Requestor/Administrator: (Print Name)		
#1 Requestor/Administrator Signature Date		
(Route to #2 Business Services FOAP App	proval Then to #3 Applicab	ole Executive Council Member)
#3 Applicable Executive Council Member: (Print Name)		
#3 Applicable Executive Council Member Signature Date	[ ] <b>Denied</b> (Return to Requester)	[ ] Approved (Route to #4 (Exec Dir. Financial & Fiscal Serv)
	[ ] Denied	[ ] Approved
#4 Exec Dir. Financial & Fiscal Services Signature Date	(Return to Requester)	(SEND to Human Resources)
*** ABOVE SIGNATURES MUST BE OBTAINED	O PRIOR TO SUBMISSION	N TO HUMAN RESOURCES ***
Executive Council Review: [ ] Approved [ ] Denied / Reason	n for Denial:	
Superintendent/President	Date	
FOR HR USE ONLY – Please do not complete this area.		
[ ] HR Subgroup Committee Review Date:	[ ] Reorg	
[ ] BC Budget Committee Review Date:	[ ] Other	
[ ] SPC Strategic Planning Review Date:		