

Date submitted



UNIVERSITY OF
GEORGIA
Student Affairs

OVPSA use only

Reviewed _____
Emailed to Dept. _____

Request to Fill a Staff Position

Employment status

Choose one: Full-time Part-time

Choose one: Regular Temporary

Department _____

Name of requestor _____

OneUSG Position # _____

Vacated by _____

Working title _____

Reason Position was vacated _____

BCAT Code _____

Maximum Salary offer _____

Payment account type: (check all that apply)

State/Tuition

Dept. Sales/Service

Restricted

Auxiliary

Student Fee Budget

Justification:

Please use the space provided below to include justification of need to fill/create position and any pertinent budget information if a redirection of funds is necessary to offer a salary at the maximum salary offer amount.

This request is submitted with the understanding that the position is mission critical and all funds associated with the request are available and are not required to meet any budget reductions or program redirections.

Once approved (or not), this form should be returned to:

Name

Email

Step 1: Person completing this form should obtain the following 4 signatures, then send to the OVPSA

1. _____
Name of Department HR

Signature of Department HR

2. _____
Name of Department Budget Rep.

Signature of Department Budget Rep.

3. _____
Name of Department Head/Director

Signature of Department Head/Director

4. _____
Name of Admin Team Member

Signature of Admin Team Member

Step 2: OVPSA Approval

Victor K. Wilson

Date