

REQUEST TO ANNOUNCE

Please provide rationale (all positions) for filling position,
i.e., alternatives to filling position, impact of not filling position.

☐ Modesto Junior College ☐ Columbia College ☐ Central Services

Position Title _____ Division Unit _____

☐ *Faculty ☐ Management – Salary Range _____ ☐ Classified – Salary Range _____

***If faculty forward to Academic Senate for signature:**

Academic Senate President/Designee _____ Date: _____
(sign & print name)

Requested by (sign & print name) _____ Date: _____

Recommended by Cabinet Level Administrator (signature) _____ Date: _____

1. A. Is this a replacement position? ☐ If an increase/decrease in assignment, complete #9 below.

Replacement for whom _____

B. Is this a new position? ** ☐ *Request for a New Position* form required for positions w/new titles.

****If Classified new position forward to CSEA President/Designee for signature:**

CSEA President/Designee: _____ Date: _____
(sign & print name)

2. If this is replacement position, indicate reason for replacement:

☐ Resignation ☐ Retirement ☐ Termination ☐ Personal Leave ☐ Promotion
☐ Other _____ Effective date: _____

3. Is position categorically funded? ☐ No ☐ Yes If yes, name of funded project _____
What % is categorically funded? _____

4. Location – Building _____ Room _____ Phone _____

5. Work Schedule (for classified only) _____
Minimum assignment - Hrs. per day _____ Days per week _____ Months per year _____

6. Proposed start date/appointment period: _____

7. % of full-time _____

If faculty position:

☐ Academic Year – Beginning _____

☐ Interim _____ Starting Date _____ Ending Date _____

8. Account number(s) for salary

	%		%
	%		%

9. Replacement position increase/decrease in assignment: From _____ % to _____ % and/or
(circle one) from _____ # of months to _____ # of months.

Director of Budget (MJC)
Chief Operations Officer (CC)

Date

Signature, College President
(for Central Services, Chancellor's Designee)

Date

Central Services Only:

Position on re-employment list? ☐ YES ☐ NO **If YES, name of re-hire:** _____

Fiscal Services Office Approved:

Received Vacancy Notice/Approved:

Position Approved:

Fiscal Services/ Date

Vice Chancellor, HR / Date

Chancellor or Designee/Date