

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) _____ Date _____ Signature, College President _____ Date _____
Chief Operations Officer (CC) _____ (for Central Services, Chancellor’s Designee)

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