

REQUEST TO FILL — FACULTY

I. VACANCY INFORMATION

<input type="checkbox"/> NEW POSITION <input type="checkbox"/> CONTINUING TEMP	<input type="checkbox"/> REPLACEMENT FOR: _____	<input type="checkbox"/> RESIGNATION <input type="checkbox"/> RETIREMENT <input type="checkbox"/> SABBATICAL LEAVE <input type="checkbox"/> SICK LEAVE
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DIVISION: _____

DEPARTMENT: _____

COURSES TO BE TAUGHT: _____

ARE THESE COURSES LISTED IN THE MASTER SCHEDULE? ☐ YES ☐ NO

REASON FOR POSITION:

SEMESTER:

ACADEMIC YEAR: _____ ☐ FALL ☐ SPRING ☐ SUMMER I ☐ SUMMER II

POSITION TYPE: ☐ TEMPORARY ☐ TENURE TRACK ☐ FULL-TIME ☐ PART-TIME _____ (LOAD)

DEPARTMENT CHAIR SIGNATURE _____ DATE _____

DEAN OR VP SIGNATURE _____ DATE _____
(FORWARD TO PROVOST FOR REVIEW)

II. PROVOST OFFICE ACTION

☐ APPROVED ☐ NOT APPROVED

RANK AND STEP: _____

SPECIAL CONDITIONS:

PROVOST SIGNATURE _____ DATE _____
(FORWARD TO BUDGET OFFICE FOR REVIEW)

III. BUDGET OFFICE ACTION

☐ FUNDING AVAILABLE ☐ FUNDING MAY REQUIRE BUDGET REALLOCATION

POSITION NO:	FUNDING SOURCE:	%	COMMENTS:

BUDGET OFFICER SIGNATURE _____ DATE _____
(FORWARD TO PROVOST)

IV. PROVOST OFFICE ACTION

CC: ☐ DEAN / VP ☐ BUDGET OFFICE ☐ HUMAN RESOURCES ☐ SOCIAL EQUITY