UC Agriculture and Natural Resources
Staff Position Management Form

Once all approval signatures obtained, submit to: humanresources@ucanr.edu and track via Zendesk ticket

Initiator Name:		Initiator Email:		Submission Date:	

POSITION INFORMATION

Request Type:	Select from dropdown	Position Effective Date:		Zendesk Ticket #:	
Employee Class:	Select from dropdown	Proposed Job Title:		Proposed Job Code:	
Department:	Select from dropdown	Proposed Start and End Dates:		% Time:	Salary Plan: Select from dropdown

Location Code :

Salary Plan Info

Office/Room/Cube #:

(●) Fixed ( ) Variable

Supervisor Full Name:		Supervisor Position Number:	40	**Information Populated By HR Ops if NEW; Populated by location if VACANCY**	
Timesheet Approver Name:		Timesheet Approver Email:		Position Number:	
Backup Timesheet Approver Name:		Backup Timesheet Approver Email:		Position Status:	

RECRUITMENT INFORMATION

Identified Candidate:	( ) Yes (●) No	Candidate Name:		Rehire:	( ) Yes (●) No
Position Working with Youth:	( ) Yes (●) No	Fingerprint/ Background Check Type:	Select from dropdown	Funding for Fprint/ Bkg Check:	
Student Status:	( ) Yes (●) No	Campus Enrolled:		Units Enrolled:	
Position Desc. Submitted:	(●) Yes ( ) No	Posting Length Requested:			

JUSTIFICATION

Justification should include reason for position request, source of funding, any budgetary restrictions or relevant information about the contract/grant. For instance, if there are insufficient funds in the account for term of employment, identify how the position will be paid. If applicable, also provide: Previous Incumbent name, title, pay rate, % FTE, account.

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BUDGET AND FINANCIAL INFORMATION

Fund Type: Select from dropdown	**Composite Benefit Rate:** 0.00%	**Provision Amount ($):**	**New Provision:**	

Fund Effect. Date	Fund End Date	Earn Code	Chart of Account (Entity-Fund-Financial Dept-Purpose-Program-Project-Activity-Task-Award)	Pay Dist % (Must add up to 100% per Earn Code)
			TOTAL:	0.00

ROUTING INFORMATION

Select the applicable routing option to ensure you receive appropriate and timely approvals.

Select Routing Flow*:   ◯ Statewide Program   ◯ Research and Extension Center   ◯ UCCE   ◯ Administration Unit

Identify Financial Control Point: Select from dropdown   [UCPath Departments and Business Officer List](#)

SIGNATURES

Please sign the form electronically and send, by email, to the appropriate parties. Missing signatures could mean significant delays in approval and processing.

Supervisor (1)		**Vice Provost (4b)**	`
Director (2)		[RPM@ucanr.edu](#) **(5)**	
Financial Control (3)		**HR (6)**	
Statewide Program Director (4a)	`	**Additional Approvals**	

*Routing Flow:
STATEWIDE PROGRAM = Initiator -> Supervisor -> Director-> Financial Control -> SW Program Director -> RPM -> HR -> HR Ops
REC = Initiator -> Supervisor -> Director-> Financial Control -> Vice Provost -> Financial Control -> RPM -> HR -> HR Ops
ALL OTHERS = Initiator -> Supervisor -> Director-> Financial Control -> RPM -> HR -> HR Ops

12/20/23