**request to fill a critical position**

**Instructions:** *As part of the University of New Mexico’s budget strategy, all position vacancies in units participating in the Scholes Hall Cooperative Staffing Plan were placed on a hiring freeze on December 5, 2014. To request approval to fill a vacancy for a critical position, complete this form and submit to Amy Wohlert, Chair, Scholes Hall Cooperative Steering Committee.*

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| **Position Details** |
| Level 3 Org Code:       | Dept. Org Code:       | Department:       |
| Position Number:       | Position Title:       | [ ]  New Position [ ]  Existing Position  |
| Position FTE:       | Pay Grade:       | Budgeted Salary:       |
| This Position Reports To:Name:       Title:        |
| **Funding Information** |
| [ ]  I&G [ ]  Non I&G (unrestricted) [ ]  Non I&G (restricted) | Index and Account:      Index and Account:      Index and Account:      Index and Account:      Index and Account:       |
| **Vacancy Information** |
| Date of Vacancy:       | Proposed Start Date:       |
| Reason for Vacancy:       |
| **Services Impacted by Vacancy** |
| Describe the implications of not filling the vacancy as it relates to: * Services provided to university customers (internal/external)
* Legal or regulatory compliance
* Health or safety concerns
* Other liability

Considerations:* Are there opportunities for collaboration with other areas?
* Have these been explored? If so, in what ways?
 |
| **Position Duties** |
|

|  |  |  |
| --- | --- | --- |
|  | **duty/responsibility** | **% of time** |
| 1. |       |       |
| 2. |       |       |
| 3. |       |       |
| 4. |       |       |
| 5. |       |       |

In your own words, please describe the primary duties/responsibilities and approximate percentage of time spent on each duty/responsibility that will be performed by this vacancy. Please include an updated organizational chart.  |
| **Departmental Staffing** |
| Number of other vacant positions within the hiring department:      Describe any other departmental staffing concerns:       |
| **Justifications for the Position** |
| Provide any other information that should be considered in evaluating this request:       |
| **Contact Information** |
| Name:       | Phone:       | Email:       |

***NOTE: Additional information may be required upon receipt and review of this form.***

The signature below indicates that the undersigned has reviewed the information included on this form accurately reflects the need to fill the vacant position.

VP/Director Level Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved by President, Exec VP or Provost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return completed and signed form to:**

Amy Wohlert

Chair, Scholes Hall Cooperative

Scholes Hall, Suite 144

MSC05 3300
Albuquerque, NM 87131

**Phone: (505) 277-2626**