

**UC Agriculture and Natural Resources  
Staff Position Management Form**

Once all approval signatures obtained, submit to: [humanresources@ucanr.edu](mailto:humanresources@ucanr.edu) and track via ServiceNow case.

Initiator Name:

Initiator Email:

Submission Date:

**POSITION INFORMATION**

Request Type:		Position Effective Date:		ServiceNow Case #:	HRC000		
Employee Class:		Proposed Payroll Title:		Proposed Job Code:			
Department:		Proposed Start and End Dates:		% Time:	Salary Plan:		
<a href="#">Location Code</a> :		Location Specifics: Office/Cubicle #		Fixed	Variable <a href="#">Salary Plan Info</a>		
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	Working Title:	
Position Working with Youth:	Yes	No	Fingerprint/ Background Check Type:					Job Posting Reviewer:	
Student Status:	Yes	No	Campus Enrolled:		Units Enrolled:	#		External Job Posting Sites:	
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.

**BUDGET AND FINANCIAL INFORMATION**

Fund Type:		<input type="text"/>	<a href="#">Composite Benefit Rate:</a>	<input type="text"/>	Provision Amount (\$):	<input type="text"/>	New Provision:	<input type="text"/>
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)	

\*GL (Entity-Fund-Financial Dept-Purpose-Program-Project-Activity) PPM **TOTAL:**  
 (\*Entity-Fund-Financial Dept-Purpose-Program-Project-Activity-Task)

**Funding for Background Check/Fingerprint\*:**  
**Funding for External Job Posting\*:**

**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:  [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)	<input type="text"/>	Vice Provost (4b)	<input type="text"/>
Director (2)	<input type="text"/>	<a href="mailto:RPM@ucanr.edu">RPM@ucanr.edu</a> (5)	<input type="text"/>
Financial Control (3)	<input type="text"/>	HR (6)	<input type="text"/>
Statewide Program Director (4a)	<input type="text"/>	Additional Approvals	<input type="text"/>

\*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