

POSITION ACTION REQUEST
Department of Military Affairs

Base/Division/Directorate:

Fill Existing Position:

Position Number:	Name of Former Incumbent:	Term Date of Former Incumbent:	<input type="checkbox"/> Replace, Same Duties
			<input type="checkbox"/> Replace, Changed Duties

Request New Position (*Attach funding commitment/obligation document(s) from funding source)

<input type="checkbox"/> Permanent		
<input type="checkbox"/> Limited Term Employment (LTE)	Anticipated Duration of Employment (number of months):	Hours per pay period
<input type="checkbox"/> Project Position		

Is funding source a grant or cooperative agreement? (This is for existing and new positions)

No

Yes: Which Agreement? _____ What Activity? _____

Work Location Address:	Work Schedule / Hours of Position:
Street: _____ City: _____ ZIP: _____	

Approved by First Line Supervisor:	Date:
Print Name: _____ Signature: _____	

Approved by Second Line Supervisor:	Date:
Print Name: _____ Signature: _____	

Base Commander/Division Administrator/Directorate Director:	Date:
Print Name: _____ Signature: _____	

For Administrative Use Only

For State Human Resources Use Only:

Class Title:	Class Code:	Pay Schedule/Range:	Hourly Rate:
Delegated Class Title	CERT #	<input type="checkbox"/> Exempt	State HR Specialist Initials:
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Non-exempt	DPM Initials:

State Budget and Finance Use Only: State: _____ %

Task Group: _____ Task Profile: _____ Federal: _____ %

State Budget and Finance Director:	Date:
Print Name: Anna M. Oehler Signature: _____	

State Human Resources Director:	Date:
Print Name: Stacie A. Meyer Signature: _____	

Executive Assistant	Date:
Print Name: Leah M. Moore Signature: _____	

Appointment: Job Announcement Code: _____

Print Name: _____ EmplID: _____ Effective Date: _____

New Original Transfer Reinstatement Promotion Demotion Project LTE

Justification

The purpose of the position review is to ensure that only those positions critical to the Agency's ongoing operations are filled or created. In submitting the justification to fill a vacant position, an agency must be able to demonstrate the role of the position in addressing a mission-critical function.

Submissions that contain non-specific language (e.g., "*the position is critical to the successful operation of the agency*" or "*the agency cannot function unless this position is filled*") will not be accepted.

1. Identify the specific population served by the position.

2. Identify the consequences if the request is not approved.

3. Identify how the functions would be fulfilled if the request is not approved.