



Hiring Justification

INSTRUCTIONS: This form must be completed for all permanent, project, and limited term employment (LTE) appointments. The completed form must be returned to the assigned HR Specialist and then approved by either the State HR Director, Deputy HR Director, and/or the Equity & Inclusion Officer **prior** to an offer being made. For permanent and project positions, this form may not be submitted to Human Resources until the interviews and employment references are completed and results have been reviewed by the hiring supervisor.

SECTION 1 (to be completed by hiring supervisor)		
WORK UNIT (BASE, DIVISION, DIRECTORATE)	LOCATION	HIRING SUPERVISOR
NAME OF PROPOSED HIRE	POSITION CLASSIFICATION	RECOMMENDED SALARY \$ /Hour
PROPOSED START DATE <i>(MUST be at the beginning of a pay period)</i>	ASSIGNED HR SPECIALIST	JOB ID #

SELECTION SUMMARY (Check ONE box below which best describes the most significant reason for selecting this candidate over the other candidates):

- A. Selected person served in this position or a similar position previously
- B. Selected person has more advanced education and/or training for this position
- C. Selected person has broader or more relevant experience performing the duties of this position
- D. Selected person demonstrates greater knowledge of the key tasks required in this position

SECTION 2 (to be completed by the hiring supervisor with consultation from HR Specialist, if needed. Information can be found on the top left corner of the certification list.)

Underutilized Position

A. Position is underutilized for racial/ethnic minorities or women

- No
- Yes (Select ONE box below)
 - 1) Selected candidate is a member of the Affirmative Action group for which the position is underutilized (racial/ethnic minorities or women)
 - 2) No persons from the above Affirmative Action groups were on the certification list or all either declined an offer, failed to report, were not available, were not located, were not interested in, or were ineligible for the position
 - 3) Selected candidate is NOT in an underutilized Affirmative Action group

B. All positions are underutilized for veterans and persons with disabilities (select ONE box below)

- 1) Selected candidate is a veteran and/or person with disability
- 2) No veterans or persons with disabilities were on the certification list or all either declined an offer, failed to report, were not available, were not located, were not interested in, or were ineligible for the position
- 3) Selected candidate is NOT a veteran or person with disability

NUMBER CANDIDATES INTERVIEWED	NUMBER OF POSITIONS BEING FILLED
-------------------------------	----------------------------------

SECTION 3 (to be completed by hiring supervisor)

WRITTEN HIRING JUSTIFICATION: *Provide a detailed job-related justification for recommending the selected candidate over the other applicants (e.g., number of years in profession, years of experience, past relevant experience, educational background, etc.). Include information gathered from the interviews and reference checks.*

SECTION 4 (to be completed by hiring supervisor)

PAY UPON APPOINTMENT JUSTIFICATION: *Explain why you are requesting this rate of pay. This section is required for all broad banded positions and hiring actions that allow for discretion in setting pay. In reviewing pay recommendations, HR considers current budget, state seniority, pay of others within the same classification, pay of others doing similar work within DMA, the experience and education detailed in the resume of the selected candidate, other written information submitted by the selected candidate in the application process, references of the selected candidate, the selected candidate's performance in their interview(s), and post-certification testing results (if applicable). In writing this justification, include available information relevant to these considerations.*

SECTION 5 (to be completed by the interview panel members, aside from the hiring supervisor)
Please remember that each panel member should have completed the Interview Best Practices training.

SIGNATURE OF PANEL MEMBER 1	DATE	AGREE WITH SELECTION? IF NO EXPLAIN WHY.
SIGNATURE OF PANEL MEMBER 2	DATE	AGREE WITH SELECTION? IF NO EXPLAIN WHY.
SIGNATURE OF PANEL MEMBER 3	DATE	AGREE WITH SELECTION? IF NO EXPLAIN WHY.
SIGNATURE OF PANEL MEMBER 4	DATE	AGREE WITH SELECTION? IF NO EXPLAIN WHY.

SECTION 6 I acknowledge the above information is correct and has been completed.

SIGNATURE OF HIRING SUPERVISOR	DATE
--------------------------------	------

SECTION 7 HR Director or Deputy HR Director approval is required prior to an offer being made

SIGNATURE OF HR DIRECTOR OR DEPUTY HR DIRECTOR	DATE
--	------

SECTION 8 Equity & Inclusion Officer's signature is required if position is underutilized, and the person recommended for hire is not from an Affirmative Action group.

SIGNATURE OF EQUITY & INCLUSION OFFICER	DATE
---	------