# Essential Hiring Review Justification Form

This form is to be used by all departments that are requesting to fill a newly created or vacant benefits-eligible staff or faculty position, excluding grant-funded positions. **This fully approved form must be attached to the Job Requisition in Workday.**

|  |  |
| --- | --- |
| **College/Organizational Unit** | Click here to enter text. |
| **Workday Supervisory Org** | Click here to enter text. |
| **Workday Position Title** | Click here to enter text. |
| **Type of Action** | Fill New Position Refill of Vacancy |
| **FTE (must be 0.75 FTE or more)** | Click here to enter text. |
| **Current/Proposed Budget** | Click here to enter text. |
| **Anticipated Salary Range** | Click here to enter text. |
| **Prior Incumbent (if Refill)** | Click here to enter text. |

# Justification

1. Describe the essential duties/functions of the position and why this position must be filled immediately.  
   Click here to enter text.  
   * Is delaying this hire an option? Please describe/justify and, if so, identify a date.  
     Click here to enter text.
   * How is the position immediately critical to meeting/sustaining accreditation requirements?  
     Click here to enter text.
   * How is the position immediately critical to fulfilling the department’s core mission?  
     Click here to enter text.
   * What would be the impact if the position is not filled? (I.e., are there concerns surrounding safety, regulations, or compliance; concerns on delivery of essential services; or a negative impact to students/the university?)  
     Click here to enter text.
2. Have any other changes in your organization taken place for this position (e.g. combined roles, eliminated/automated work) to evaluate the importance/need of this role?  
   Click here to enter text.
3. How could the duties of this position instead be handled or reassigned to other staff within the department or division?  
   Click here to enter text.
4. How will the position be funded? If you plan to reallocate funds, please describe.  
   Click here to enter text.
5. If a refill, how long has the position been vacant and how has the work been accomplished during that time?  
   Click here to enter text.

**Signatures** (Enter Typed Name and Sign) **Date**

|  |  |  |
| --- | --- | --- |
| **Requested by:** | Click here to enter text. | Click here to enter a date. |
| **Dean/Cabinet:** | Click here to enter text. | Click here to enter a date. |
| **Aaron Howell:** | Click here to enter text. | Click here to enter a date. |