

**Declaration of Vacancy (DOV)**

**Division:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Office of the President | <input type="checkbox"/> Administration & Finance | <input type="checkbox"/> Academic Affairs       |
| <input type="checkbox"/> Student Affairs         | <input type="checkbox"/> University Advancement   | <input type="checkbox"/> Information Technology |

**Position Information:**

Department Name: \_\_\_\_\_

Position Number: \_\_\_\_\_ Dept ID: \_\_\_\_\_ Fund: \_\_\_\_\_

CSU Classification Title: \_\_\_\_\_ Job Code: \_\_\_\_\_ Range: \_\_\_\_\_

Working Title: \_\_\_\_\_

Salary Range: \_\_\_\_\_ to \_\_\_\_\_ Dept. Max (if applicable): \_\_\_\_\_ Hourly Rate (if applicable): \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Reports to PSN Number: \_\_\_\_\_

**Appointment Type:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> F/T MPP               | <input type="checkbox"/> P/T MPP                           | <input type="checkbox"/> F/T Temporary                     |
| <input type="checkbox"/> F/T Permanent         | <input type="checkbox"/> P/T Permanent<br>Time Base: _____ | <input type="checkbox"/> P/T Temporary<br>Time Base: _____ |
| <input type="checkbox"/> Intermittent (Hourly) |  |  |

Work Hours: \_\_\_\_\_

**Type of Vacancy:**

- |   |  |
|---|--|
| <input type="checkbox"/> New Position   | <input type="checkbox"/> Employee Replacement, employee being replaced: _____    |
|   | Reason for replacement: <input style="width: 300px; height: 20px;" type="text"/> |
| <input type="checkbox"/> Emergency Hire | <input type="checkbox"/> Internal Only Recruitment                               |

**Documents Needed for Recruitment:**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Classified Position Description (signed) | <input type="checkbox"/> Interview Team Members Form  | <input type="checkbox"/> Position Request Form to Budget (if needed) |
| <input type="checkbox"/> Interview Questions                      | <input type="checkbox"/> Justification Memo to the President for MPP/Confidential recruitments only |  |

**Approvals:**

Hiring Manager Name: _____	Signature: _____	Date: _____
VP/Designee Name: _____	Signature: _____	Date: _____

**Approvals For MPP/Confidential Recruitments Only:**

AVP, HR/Designee: _____	Date: _____
President's Signature: _____	Date: _____