

Position Justification Form



The purpose of this form is to provide organizational justification for filling an existing position. Any reorganization requests must have a Position Justification Form attached. Complete form to initiate review. It is imperative that the questions be answered in narrative format with as much detailed information as possible to support the request.

Submit completed form to People, Culture, and Technology Services (HR) by emailing jobs@sdccd.edu.
GFU positions will be sent to the Chancellor for consideration. Vacant funded GFR positions require VC, PCTS review only.

Position Title _____ Position Number _____
Campus/Department _____ GL Number _____

Position funding: ☐ GFU ☐ GFR ☐ Split _____% GFU _____% GFR

Date the position vacated: _____

Employee being replaced: _____

Reason for vacancy:

☐ Retirement

☐ Termination*

☐

Promotion/Transfer

☐

Resignation

If due to performance management efforts, check. ☐

For PCTS Use Only

☐ Vacant

☐ Funded

☐ Restricted

Verified by: _____

VCHR review: _____

Justification for Requested Action

A What is the compelling need for this position to be filled?

B What impact will there be if this position is not filled?

Requested by:

Print Name

Signature

Date

Cabinet Member:

Print Name

Signature

Date

Chancellor: ☐ Approved ☐ Unapproved

Signature

Date