

## Board of Supervisors for the University of Louisiana System

## **UNCLASSIFIED POSITION DESCRIPTION, JUSTIFICATION & CERTIFICATION FORM**

	Control #								
Institution Name:	Academic Department /Administrative Unit:								
Budget Page:	Line #: Current Budgeted Amt:						Status:	. 🗌 12 mo.	
Source of Funding:	State	Federal	Restricted	Self-C	Generated	G	rant/Contract	Auxiliary	
Type of Position:	Dean Vice President (Asso./Asst.) Provost Athletic Director/ Equivalent Other								
Nature of Request:	New (attach explanation) Replace/Update (salary increase exceeds 10% - explain below) Emergency/Temporary								
Justification:									
*If necessary, please	continue justificatio	n on another pag	ge.						
Employee Name:									
Current Title:	Present Salary:								
Requested Position Title:					oposed Annual TO Salary Range:				
Proposed Beginning Salary:					Effective Date:				
Current or Previous									
Incumbent: Reassignment									
/Promotion For:									
It is recommended tha officer designation requ	uired by the Cons	stitution (Articl	e X, Section	n <sup>2</sup> ) and a	ppropriate	e civil se	ervice rules. In	addition, we will	
(have) follow(ed) the guidelines.	University's estab	lished hiring	policies and	d procedur	es and p	ublishec	l equal employ	ment opportunity	
Approved By:									
Dean/Director Date:									
Vice President Date:									
President						Date:			
COSTING ALLOCATION									
Cost Center*	Program*	Grant*	G	ift*	Projec	t*	Amount	Percentage	
Line 1 Line 2									
Line 3									
Line 4	lorktag per line				Total				
*Enter only one W	orklay per line			L	.000	·			