Clear All

NATSCI SF-1

REQUEST FOR POSITION ACTION

PSEUDO NO. _____

REQUESTING COLLEGE, DIVISION/DEPARTMENT, PROGRAM: College of Natural Sciences /

1. TYPE OF ACTION REQUESTED

- ☐ 1. ESTABLISHMENT OF NEW POSITION
- ☐ 2. REDESCRIPTION OF POSITION FOR REVIEW
  - ☐ IDENTICAL TO POSITION NO. _____
- ☐ 3. CONTINUATION OF TEMPORARY POSITION
- ☐ 4. FILLING OF ESTABLISHED POSITION VACANCY
- ☐ 5. FILLING POSITION TEMPORARILY NTE _____
- ☐ 6. NOTICE OF ABOLISHMENT OF POSITION
- ☐ 7.

2. TYPE OF POSITION

- ☐ 1. PERMANENT
- ☐ 2. TEMPORARY NTE _____
- ☐ 3. TEMPORARY TO PERMANENT

3. POSITION CONTROL

- ☐ 1. WITHIN AUTHORIZED CEILING
- ☐ 2. BEYOND AUTHORIZED CEILING
- ☐ 3. NO CEILING

4. FUNDS AVAILABLE

- ☐ 1. GENERAL
- ☐ 2. SPECIAL
- ☐ 3. FEDERAL
- ☐ 4. REVOLVING
- ☐ 5. TRUST
- ☐ 6.

(Indicate details in space provided for justification)

5. POS. NO. Clear	6. POSITION TITLE	7. CLASS CODE	8. PAY RANGE	9. B.U.	10. ORG CODE	11. ISL'D

12. ACCOUNT CODE	13. PERCENT	14. TIME AUTH.	12. ACCOUNT CODE	13. PERCENT	14. TIME AUTH
1) 2)			1) 2)		

JUSTIFICATION FOR ABOVE REQUESTED ACTION (Attach additional sheets if more space is required)

Clear

_____ DATE _____ SIGNATURE OF CHAIR OR PRINCIPAL INVESTIGATOR

APPROVED ☐ DISAPPROVED ☐ RECOMMENDATIONS:

Certified to the availability of funds:

_____ DATE _____ FISCAL OFFICER

APPROVED ☐ DISAPPROVED ☐ REMARKS:

_____ DATE _____ DEAN, DIRECTOR OR DESIGNEE

APPROVED ☐ DISAPPROVED ☐ REMARKS:

_____ DATE _____ PRESIDENT, UNIVERSITY OF HAWAI'I, OR DESIGNEE

REMARKS:

_____ DATE _____ SYSTEM DIRECTOR OF HUMAN RESOURCES