

Request for SCS Director Approval to Fill

Vacancies Prior to Election for a Statewide Office

*Est. 10/2023*

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| **SCS Rule 22.2 requires an appointing authority to obtain the Director’s approval before making a permanent appointment to any job at or above MS-524, AS-623, SS-422, PS-120, WS-223, or TS-319 between the date of any election for a statewide elected office and the date the elected official takes office. The Director may exempt jobs from this requirement.****This form serves as the official request document for agencies to use when submitting a request to the SCS Director per SCS Rule 22.2.** |
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| **SECTION 1: REQUEST INFORMATION**  |
| REQUEST DATE      | AGENCY NAME      | PERSONNEL AREA CODE      |
| JOB TITLE      | PAY LEVEL      | POSITION NUMBER      |
| REQUESTED EFFECTIVE DATE      |
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| **SECTION 2: POSITION INFORMATION**  |
| POSITION NUMBER      | JOB TITLE      | PAY LEVEL      |
| **Is this position currently vacant?** | **[ ]  YES [ ]  NO** |
| **If vacant, please list last holder of this position and the date it was vacated.** |       |
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| **SECTION 3: EMPLOYEE INFORMATION** |
| EMPLOYEE NAME      | EMPLOYEE PERSONNEL NUMBER      |
| CURRENT JOB TITLE      | CURRENT PAY LEVEL      |
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| **SECTION 4: JUSTIFICATION*****The agency may attach a separate document including additional justification/reasoning for the request, if needed.*** |
| **Please provide details on the reason why the vacancy needs to be filled by permanent appointment at this time.** |
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| **AGENCY CONTACT INFORMATION** |
| **Signature of Appointing Authority or Designee** | **Date** |
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| **Name of Appointing Authority or Designee** | **Title of Signee** |
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| **Human Resources Contact Information** |
| **Name** |  |
| **Email Address** |  |
| **Phone Number** |  |

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| **FOR STATE CIVIL SERVICE USE ONLY** |
| **Signature of State Civil Service Director or Director’s Designee** | **[ ]  APPROVED** | **[ ]  DENIED** |
| **Approval Date** |
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| **SCS Comments** |
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