Executive Council
Authorization for Position Form

CUNYfirst Job Code - CUNYfirst Functional Title / CUNYfirst Contract Title:

☐ Multiple Positions	Number of Positions	**ECP**	☐
☐ **New Position**		**FACULTY**	☐
☐ **Vacancy**		**HEO**	☐
Incumbent Name(s) / CUNYfirst Position(s) #:		**CLT**	☐
		CIVIL SERVICE	☐

☐ **Substitute / Interim / Acting (Search required unless filling for someone on leave)**

☐ **Reclassification**

☐ **Merit Increase (Details in Comments Section)**

Projected Amount Needed:

Division:

CUNYfirst Dept Code - Department:

Supervisor (Reports To) / CUNYfirst Position #:

Funds Available

Department:

Budget Code:

Budget Code (Dept.# - Fund - MP - Oper Unit - Program - Funding Srce - Special Init - Dept with Program Name)

Comments:

Authorization Signature: _____

(Recording Secretary)   **Date:**

Prepared	Signature: _____	
By	Print Name:	**Date:**

c: Business Office

Human Resources 4/29/24

Affirmative Action