

DCFS POSITION ACTION REQUEST FORM

PART 1: TYPE OF REQUEST (check all that apply)		
<input type="checkbox"/> Fill Position (T.O.)	<input type="checkbox"/> New Position/MJD	<input type="checkbox"/> New Position – SF-3
<input type="checkbox"/> Fill Position (Non-T.O.)	<input type="checkbox"/> Move Position/MJD	<input type="checkbox"/> Move Position – SF-3
<input type="checkbox"/> Unfund/Swap Position	<input type="checkbox"/> Other	<input type="checkbox"/> Update Position – SF-3

PART 2: POSITION DATA							
Job Title:		Position #:		In T.O.?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Pay Scale Level:		Biweekly Pay Range:					
Bureau/Division or Region:				Work Location/Parish:			
Functional Program Assignment:				Org. Unit #:			
Cost Center #:		% (Must Total 100%)		Fund #:		% (Must Total 100%)	
AFS Budgeted Program Area:	<input type="checkbox"/> 1000 – Admin & Exec Support			<input type="checkbox"/> 2000 – Prevention & Intervention			
	<input type="checkbox"/> 3000 – Community & Family Support			<input type="checkbox"/> 4000 – Field Services			
Former Incumbent:				Date Vacated:			
Title of Supervisor:				Supervisor Position #:			

PART 3: DATA FOR POSITION TO BE SWAPPED/UNFUNDED							
Job Title:		Position #:		In T.O.?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Pay Scale Level:		Biweekly Pay Range:					
Bureau/Division or Region:				Work Location/Parish:			
Functional Program Assignment:				Org. Unit #:			
Cost Center #:		% (Must Total 100%)		Fund #:		% (Must Total 100%)	
AFS Budgeted Program Area:	<input type="checkbox"/> 1000 – Admin & Exec Support			<input type="checkbox"/> 2000 – Prevention & Intervention			
	<input type="checkbox"/> 3000 – Community & Family Support			<input type="checkbox"/> 4000 – Field Services			
Former Incumbent:				Date Vacated:			

PART 4: BRIEF DESCRIPTION OF ACTION NEEDED & JUSTIFICATION OF POSITION NEED:
Additional info. required for Restricted Appointment, Job Appointment or Detail to Special Duty:
Why is temporary appointment needed rather than permanent appointment AND how long is appointment needed for?

Job Title:		Position #:	
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PART 5: METHODS OF RECRUITMENT REQUESTED (check all that apply)	
<input type="checkbox"/> Probational Announcement	<input type="checkbox"/> Continuous Announcement
<input type="checkbox"/> Job Appointment Announcement	<input type="checkbox"/> Restricted Appointment
<input type="checkbox"/> Promotional Announcement – DCFS Only	<input type="checkbox"/> Student Appointment
<input type="checkbox"/> Promotional Announcement – All State Agencies	<input type="checkbox"/> Unclassified Appointment
<input type="checkbox"/> Newspaper or other Advertisement (attach specific information)	
<input type="checkbox"/> No Recruitment/Announcement Required (explain why):	

PART 6: FILTER QUESTIONS TO BE INCLUDED ON JOB POSTING (attach additional page if needed)
Special Circumstances and Preferred Requirements (attach additional page if needed)

PART 7: REVIEW OF JOB DUTIES (One box MUST be checked)
<input type="checkbox"/> I hereby certify that I have reviewed the duties of this position and that they remain unchanged from the SF-3 currently on file with the Department of Civil Service.
<input type="checkbox"/> Position duties have changed & SF-3: <input type="checkbox"/> Attached <input type="checkbox"/> Submitted on (date):
<input type="checkbox"/> Position is at supervisor or above level & SF-3: <input type="checkbox"/> Attached <input type="checkbox"/> Submitted on (date):

PART 8: REQUIRED SIGNATURES & APPROVALS
Recommended By: _____ Section/Unit Supervisor _____ Date _____
Recommended Approval: _____ Bureau/Division Director/Regional Administrator _____ Date _____
APPOINTING AUTHORITY DECISION
<input type="checkbox"/> Request is granted <input type="checkbox"/> Request is denied
Comments: _____
Appointing Authority Signature: _____ Date: _____

HUMAN RESOURCES SECTION USE ONLY
ALL REQUIREMENTS OF ARTICLE X, CIVIL SERVICE RULES, UNIFORM CLASSIFICATION AND PAY PLANS AND POLICIES AND PROCEDURES ISSUED BY THE CIVIL SERVICE DIRECTOR HAVE BEEN MET.
CERTIFIED BY: _____ DATE _____ HUMAN RESOURCES STAFF MEMBER