***Sacramento City Unified School District***

 **SCOE USE ONLY:**

[ ]  **Approved**

[ ]  **Not Approved**

 **Initials\_\_\_\_\_\_\_\_\_\_\_**

**2023-2024 NEW POSITION OR CHANGE IN FTE**

**JUSTIFICATION FORM**

**Instructions:** Complete this form for new positions or change in FTE. This form should be submitted with the Position Requisition Form (BUD-F001). Submit completed documents to the Chief Officer who oversees the initiating department or school site.

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| --- | --- |
| **Date** | Click here to enter a date. |
| **Position Title** | Click here to enter text. |
| **Department/School Site** | Click here to enter text. |
| **SCUSD Goal**  | Click here to enter text. |
| **1. Description of Service/Program/Position:** |
| Click here to enter text. |
| **2. Justification for New Position or Increase in FTE:** |
| Click here to enter text. |
| **3. Annual Cost of Position (Salary and Benefits):** |
| Click here to enter text. |
| **4. One-time or Ongoing Funds and Funding Source (e.g. Title vs. Unrestricted General Fund):** **4. a** Choose an item. **4. b** **Select Funding Source:** Choose an item.  **If Other or multi-funded, enter Resource Code(s) and Resource Title(s):**  Click here to enter text. |
|   |
| **5. Subject to Collective Bargaining (Yes/No):** |
| No  |
| **6. Impact on Students:** |
| Click here to enter text. |
| **7. Impact on Employees:** |
| Click here to enter text. |
| **8. Impact on Operations:** |
| Click here to enter text. |